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District Council



Wednesday, 9 October 2019 at 6.00 pm

Room 6 - Capswood, Oxford Road, Denham

AGENDA

Item

- **Evacuation Procedure** 1.
- Apologies for Absence 2.
- 3. Minutes (Pages 5 - 14)

To approve the minutes of the Cabinet held on 27 June 2019.

Declarations of Interest 4.

A. LEADER'S REPORTS

Forward Plan of Executive Decisions 5.

> As of yet, the only item on the 28 day notice for the meeting of Cabinet in February 2020 is the Air Quality Action Plan.

Performance Report - Q1 2019/20 (Pages 15 - 16) 5.1

Appendix A - Priority PIs (Pages 17 - 18)

Appendix B - Corporate Pls (Pages 19 - 20)

B. REPORTS OF THE PORTFOLIO HOLDERS

6. Customer Services and Business Support

There are no items for consideration under this item.

7. Environment

There are no items for consideration under this item.

- 8. Healthy Communities
- 8.1 Food Safety and Health and Safety Business Plans (*Pages 21 24*)

Appendix A (Pages 25 - 52)

Appendix B (Pages 53 - 82)

Appendix C (Pages 83 - 104)

9. Resources

There are no items for consideration under this item.

10. Planning and Economic Development

There are no items for consideration under this item.

- 11. Report on Special Urgency Inter Authority Agreement for Buckinghamshire County Council Legal Services (*Pages 105 - 106*)
- 12. Policy Advisory Group Minutes (available in supplement pack) to follow
- 13. Exclusion of Public

To resolve that under Section 100(A)(4) of the Local Government Act 1972 the public be excluded from the meeting for the following item(s) of business on the grounds that it involves the likely disclosure of exempt information as defined in Part I of Schedule 12A of the Act.

Note: All reports will be updated orally at the meeting if appropriate and may be supplemented by additional reports at the Chairman's discretion.

Membership: Cabinet

Councillors: N Naylor (Leader) J Read (Deputy Leader) B Gibbs P Hogan D Smith L Sullivan

Date of next meeting – Wednesday, 26 February 2020

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SOUTH BUCKS DISTRICT COUNCIL

MINUTES of the meeting of the CABINET held on 27 June 2019

Present: N Naylor, B Gibbs, P Hogan, D Smith and L Sullivan

Apologies J Read for absence:

1. **MINUTES**

The minutes of the meeting of Cabinet held on 13 March 2019 were approved and signed by the Cabinet Leader as a correct record.

2. **DECLARATIONS OF INTEREST**

There were no declarations of interest.

3. FORWARD PLAN OF EXECUTIVE DECISIONS

The Cabinet received a copy of the 28 day Notice and Forward Plan prepared in accordance with Regulation 9 of the Local Authorities (Executive Arrangements) (Meetings and Access to Information) (England) Regulations 2012 setting out the key (and non-key) decisions the Cabinet was intending to make at public and private meetings.

RESOLVED that the 28 Day Notice be noted.

4. END OF YEAR PERFORMANCE REPORT 2018/19

Cabinet received a report on the annual performance of Council Services against preagreed performance indicators and service objectives for the end of year 2018-19.

Members noted that the only two issues raised were the number of private sector dwellings being vacant for more than six months which was due to no active intervention work being undertaken by the Housing Team during 2018/19 due to other workload demands and limited identification of suitable empty homes. There had also been a dip in satisfaction in Evreham sports centre but due to action being taken this had now been improved and there was also an increase in customers.

Cabinet asked for their thanks to be passed to officers as this was the first time that all priority PIs were on target and during a time of transition with work being carried out on the new Buckinghamshire Council.

RESOLVED that the report be noted.

5. **CABINET APPOINTMENTS**

RESOLVED that

The following Cabinet appointments be confirmed:

Representation of Joint Committees and other bodies:

Chiltern and South Bucks Joint Committee

- 1. B. Gibbs
- 2. P. Hogan
- 3. N. Naylor
- 4. J. Read
- 5. D. Smith
- 6. L. Sullivan

(Plus CDC Members, see CDC appointments)

The Cabinet Leader of the Council hosting the meeting will chair the meeting

Joint Staffing Committee

- 1. R. Bagge
- 2. B. Harding
- 3. P. Kelly
- 4 N. Naylor
- 5. D. Saunders
- 6. L. Sullivan

(Plus CDC Members, see CDC appointments)

Co-Chairmen to be elected at the first meeting in the Municipal Year

Chiltern and South Bucks Joint Overview and Scrutiny Committee

- 1. Councillor Bradford
- 2. Councillor Bastiman
- 3. Councillor Bezzant
- 4. Councillor Egleton
- 5. Councillor Lewis

(Plus CDC Members, see CDC appointments)

Co-Chairman to be elected at the first meeting of the Municipal Year

Joint Waste Collection Committee ~

1. (Cabinet Member) Luisa Sullivan

2. (Non-Cabinet Member) – Vacant

(Plus CDC and WDC Members)

Chairman/Vice-Chairman to be elected at the first meeting of the Municipal Year, except where an appointment has been made for two years

Evreham Sports Centre Joint Management Committee ~

South Bucks representatives:	1. J. Jordan 2. P. Hogan (Portfolio Holder) 3. R. Sangster
Buckinghamshire County	

Buckinghamshire County Representatives:

1. Require confirmation from Bucks County Council

2. Require confirmation from Bucks County Council

Chairman/Vice-Chairman to be elected at the first meeting of the Municipal Year

The South Buckinghamshire Members Advisory Panel (8) ~

- 1. J. Read (Chairman*)
- 2. R. Bagge
- 3. M. Bradford
- 4. T. Egleton
- 5. B. Gibbs
- 6. L. Hazell
- 7. P. Hogan

8. N. Naylor

OUTSIDE BODIES

Outside Body <u>Executive functions</u> ~	Representative[s]	Relevant Portfolio	Officer Contact
Buckinghamshire Advantage District Council's Network	Nick Naylor	Leader	Bob Smith
Buckinghamshire Thames Valley Local Enterprise Partnership	John Read	Leader	Bob Smith
Bucks Planning Group	John Read	Planning and Economic Development	Mark Jaggard
Chiltern and South Bucks Strategic Partnership	Nick Naylor Paul Kelly Ralph Bagge John Read	Leader	Rachel Prance
Colne Valley Park Community Interest Company	Luisa Sullivan	Environment	Chris Marchant
Country Parks and Green Spaces Liaison Group	Luisa Sullivan	Environment	Chris Marchant
Groundwork South Trust Ltd	Luisa Sullivan	Environment	Simon Gray
Healthy Communities Partnership	Patrick Hogan	Healthy Communities	Martin Holt
Heathrow Airport Community Engagement Board	John Read	Planning and Economic Development	Ben Coakley
Local Government Association	Nick Naylor John Read (Deputy)	Leader	Bob Smith
L & Q Shires Neighbourhood Committee	Patrick Hogan	Healthy Communities	Michael Veryard
Natural Environment Partnership	Luisa Sullivan	Environment	Chris Marchant
New Denham Minerals Liaison Group	Luisa Sullivan	Environment	Ben Coakley

Padstones	Patrick Hogan Wendy Matthews [Deputy]	Healthy Communities	Michael Veryard
Park Lodge Farm Liaison Committee	Luisa Sullivan	Environment	Ben Coakley
Pinewood Community Liaison Group	Ralph Bagge Malcolm Bradford Wendy Matthews Luisa Sullivan	Leader	Bob Smith
South East England's Council	Ralph Bagge on behalf of Leader	Leader	Bob Smith

6. AGREEMENT TO SIGN THE MOTOR NEURONE DISEASE (MND) CHARTER

Cabinet received a report which sought approval that the Council signs the Motor Neurone Disease (MND) Charter which recognised and respected the rights of people with MND as set out in the Charter and also that the Council would work towards the Charter's vision of the right care, in the right place at the right time. Cabinet Members welcomed the Charter which would ensure that council's policies and procedures would enable people with MND to receive a rapid response to their needs and good quality care and support.

RESOLVED that Cabinet support and sign the Motor Neurone Disease (MND) Charter

7. COMMUNITY GRANTS PROPOSAL

Cabinet were asked to approve the process to award funding for the community project grants for the period 2019/20 and in addition to agree the Service Level Agreement funding for specific organisations for a three year period subject to a signed agreement. This would enable certainty of funding for the key organisations in receipt of a Service Level Agreement during the transitionary period of the new Buckinghamshire Council. The Director of Services reported that ward members would be allocated funding of £1096 where they could make recommendations for which organisations it could be allocated to, who met the criteria shown at Appendix 1 of the supplement report.

Cabinet Members noted that this funding was within budget and emphasised the importance of ensuring that the application process was flexible as it was a relatively small award.

If after six months the funding had not been allocated by the ward member this funding could be transferred to the Chairman's Fund for awards to be distributed.

RESOLVED that

1 the community grant funding be agreed as follows:-

- a. £4,000 per annum to Rape Crisis
- b. £42,023 per annum to Three Rivers CAB
- c. £7,000 per annum to Wycombe Womens Aid

d. £6,900 per annum to Connections

for the period 1st April 2019 to 31st March 2022, subject to a signed service level agreement

2. continued funding of £8,000 to Buckinghamshire County Council be agreed to provide the voluntary sector infrastructure support contract within South Bucks District and the wider Buckinghamshire area for the period 2019/20.

3. the Community Development Grant, lottery Community Central Pot and part of the Chairman's Fund be combined to establish the South Bucks Community Grants to be administered by the Council.

4. £5,000 be retained from the Chairman's Fund for small awards to be distributed by the Chairman.

5. the South Bucks Community Grants criteria detailed in Appendix 1 of the supplement report be agreed.

6. the award of funding of \pm 1,096 from the South Bucks Community Grants fund is allocated to each Ward Member to advise on use, and it is delegated to the Healthy Communities Officer in consultation with the Ward Member to determine grants made.

8. CHILTERN AND SOUTH BUCKS LEISURE ADVISORY BOARD TERMS OF REFERENCE

Cabinet were asked to agree the proposal to change the Joint Leisure Advisory Board name to the Active Life Advisory Board and to amend the Group's Terms of Reference accordingly to ensure that the Council was in the best position to contribute effectively to the public health agenda. As well as monitoring the leisure centre contract performance, projects now included social prescribing, community outreach to address social isolation, falls prevention and exercise referral.

RESOLVED that the name of the Board be amended including the terms of reference set out in the appendix to the report.

9. TREASURY MANAGEMENT - ANNUAL REPORT 2018/19

Cabinet were asked to note the Treasury Management performance for 2018/19 as required by the Code of Practice for Treasury Management. The Director of Resources

referred to the loan from the Public Works Loan Board to finance the purchase of a budget hotel through Consilio Property Ltd – the value of the loan was £5,478,000 borrowed at an interest rate of 2.09% repayable over 10 years.

RESOLVED that the Treasury Management Performance for 2018/19 as required by the Code of Practice for Treasury Management be noted.

10. CONSILIO BUSINESS PLAN

Cabinet were asked to approve the Business Plan for Consilio Property Ltd. This report was also discussed by the Overview and Scrutiny Committee who were very supportive of the Business Plan. Once the Plan had been approved by Cabinet it could be tabled at the Consilio Property Ltd Annual General Meeting. The Director of Resources informed Members that following a slowdown in the property investment market and the issuing of further guidance from CIPFA, it was agreed by the Board that the new Business Plan should be reviewed to take account of this. It also included the process for liaison and reporting with the new Shadow Executive of the new Buckinghamshire Council.

RESOLVED that the Business Plan for the financial year 2019/20 as contained in the exempt appendix be approved.

11. POLICY ADVISORY GROUP MINUTES (AVAILABLE IN SUPPLEMENT PACK)

The Policy Advisory Group Minutes in the supplement pack were noted.

12. **EXCLUSION OF PUBLIC**

RESOLVED that under section 100 (A) (4) of the Local Government Act 1972 (as amended) the public be excluded from the meeting for the following item(s) of business on the grounds that they involved the likely disclosure of exempt information as defined in Part 1 of Schedule 12A of the Act.

13. APPLICATION FOR DISCRETIONARY RATE RELIEF

The Cabinet considered an application for discretionary rate relief. At a previous Cabinet Meeting Members had requested further information in support of the application for 2019/20 to enable them to decide whether the organisation had demonstrated that it was providing added value to the local community as currently the organisation had a number of access restrictions to residents. Members considered that the letter from the organisation did not include enough significant benefits for the community to award Discretionary Rate Relief.

RESOLVED that the relief should not be awarded for this organisation in this instance.

14. **FARNHAM PARK PLAYING FIELDS**

Cabinet received a report on the options for Farnham Park Playing Fields. Over the past few years options had been explored to reduce the operational cost of the playing fields and to improve its usage for outdoor sports. In Autumn 2018 KKP consultants had been re-engaged to undertake further work focusing on discussing with various national sporting bodies their view of the sites potential and scope for providing funding towards the project.

The options in the report took account of the following:-

- optimising the layout of the pitches
- developing a single building including sufficient space for bar and catering facilities
- providing a flexible space for meeting rooms and community activities
- northern area of the sites being used for informal purposes such as dog walking and enhancing biodiversity.

Members noted that the Overview and Scrutiny Committee and The South Buckinghamshire Members Advisory Panel had been very supportive of making the most of this community asset, particularly in relation to the public health agenda. In terms of the next steps Members agreed that the Shadow Executive Leader should be made aware of this community asset including how the future vision for this project would fit into the new Buckinghamshire Council. Cabinet welcomed this approach.

RESOLVED that the Director of Resources prepare information to take forward discussions on the future vision of the site with the new Buckinghamshire Council and its value as a community facility and for the delivery of the new Council's public health objectives.

15. OPTIONS FOR PARKSIDE HOUSE, PARKSIDE CEMETERY, FULMER

Cabinet received a report which set out a number of options for the future use of Parkside House, at Parkside Cemetery, Fulmer. The Policy Advisory Group had recommended that Parkside House be refurbished to provide two lettable units within the budget set out in Option B of the report with the aspiration of providing housing for key workers in the local area if that proved feasible. If this did not prove feasible for example there was no option to protect the Council's assets by excluding the right to buy, than the most appropriate financial option should be taken forward which met the Council's objective to optimise the effective use of resources and assets.

RESOLVED that

- 1 subject to a successful planning application, to appropriate Parkside House from its current use as tied cemetery accommodation to planning purposes pursuant to Section 122 of the Local Government Act 1972 and Sections 226 and 227 of the Town and Country Planning Act 1990
- 2 authority be delegated to the Director of Services in consultation with the Portfolio Holder for Resources to agree and implement the most appropriate financial option available for re-using Parkside House as residential accommodation after considering the feasibility of offering housing for key workers

16. **BAD DEBT WRITE OFF REQUEST**

Cabinet received a report on a write-off of a debt, which was not recoverable. This was related to homelessness bed and breakfast accommodation which occurred before June 2017. Cabinet Members noted that procedures were now in place to ensure that the Council had a robust recovery process to enable arrears on the charges for temporary accommodation to be dealt with efficiently and consistently. The Chief Executive reported that Internal Audit would undertake another audit on the recovery process to ensure its robustness following the implementation of the recommendations from the Overview and Scrutiny Committee's review of homelessness management.

RESOLVED that the write-off of the debt be agreed.

17. CONSILIO BUSINESS PLAN APPENDICES

The Consilio Business Plan Appendices were considered as part of item 8.2.

18. HEALTHY COMMUNITIES - APPENDICES FOR COMMUNITY GRANTS PROPOSAL

The appendices for the Community Grants proposal were considered as part of item 7.2.

The meeting ended at 7.11 pm

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Agenda Item 5.1

Cabinet 9 October 2019 Via Overview and Scrutiny Committee 1 October 2019

REPORT SUBJECT:	South Bucks District Council Performance Report Quarter 1 2019-20
REPORT OF:	Leader of the Council – Councillor Nick Naylor
RESPONSIBLE OFFICER	Director of Resources & Head of Paid Service– Jim Burness
REPORT AUTHOR	Ani Sultan (01494 586 800)
WARD(S) AFFECTED	Report applies to whole district

1. Purpose of Report

This report outlines the annual performance of Council services against pre-agreed performance indicators and service objectives for Quarter 1 of 2019-20.

RECOMMENDATION

Cabinet is asked to note the performance reports.

2. Executive Summary

Overview of Quarter 1 of 2019-20 performance indicators (PIs) against targets across the Council:

Portfolio	No of Pls	PI on target □	PI slightly below target	PI off target	Not reported this quarter/ not used	Awaiting data	Data Only
Leader's	3	3	0	0	0	0	0
Resources	4	2	2	0	0	0	0
Healthy communities	18	6	0	1	3	0	8
Planning & Economic development	18	13	0	0	1	0	4
Environment	4	3	0	0	1	0	0
Customer & Business Support	9	5	0	0	3	1	0
Total Pls	56	32	2	1	8	1	12

3. Reasons for Recommendations

- 3.1. This report details factual performance against pre-agreed targets.
- 3.2. Management Team, Cabinet and Overview & Scrutiny Committee receive regular updates detailing progress towards service plan objectives, performance targets and strategic risks, in line with our Performance and Improvement Framework.
- 3.3. Two detailed performance tables accompany this report:
 - Appendix A Priority Quarter 1 of 2019-20
 - Appendix B Corporate Pls Quarter 1 of 2019-20

4. Key points to note:

- 4.1. There is one Customer & Business Support PI marked as awaiting data number of complaints received cumulatively as this has been moved over from the Leader's Portfolio, and the data is being compiled.
- 4.2. All priority PIs are on target, excepting SbRB1 and SbRB2 (Speed of Processing new HB/CTB claims and Speed of Processing changes of circumstances for HB/CTB claims), which are further explained in 4.2.2.
 - 4.2.1. **Leaders**: All PIs within the Leader's portfolio are on target.
 - 4.2.2. **Resources:** SbRB1 and SbRB2 (Speed of Processing new HB/CTB claims and Speed of Processing changes of circumstances for HB/CTB claims), May performance was affected by an increase in the number of changes received as a result of annual bills being issued, which has so far affected performance due to these being cumulative indicators. Performance is slightly below target and due to be back on target shortly.
 - 4.2.3. **Healthy Communities:** Although under the quarterly target of 12.5% at 5.3%, this is a cumulative indicator that should reach its target at the end of 19/20.
 - 4.2.4. **Planning & Economic Development:** All PIs for this portfolio are on target.
 - 4.2.5. **Environment:** All PIs for this portfolio are on target.
 - 4.2.6. **Customer & Business Support** All PIs are on target, which is a marked improvement on the previous quarters.

5. Consultation

Not applicable.

6. Options

Not applicable.

7. Corporate Implications

- 7.1 Financial Performance Management assists in identifying value for money.
- 7.2 Legal None specific to this report.
- 7.3 Crime and Disorder, Environmental Issues, ICT, Partnership, Procurement, Social Inclusion, Sustainability reports on aspects of performance in these areas.

8. Links to Council Policy Objectives

Performance management helps to ensure that performance targets set through the service planning process are met, and that any dips in performance are identified and resolved in a timely manner.

This report links to all three of the Council's objectives, listed below:

Objective 1 - Efficient and effective customer focused services

Objective 2 - Safe, healthy and cohesive communities

Objective 3 - Conserve the environment and promote sustainability

9. Next Step

Once approved, this report and appendices will be published on the website.

Appendix A - Priority PIs 2019-20 - SBDC

		2018/19	Apr-19	May-19	Jun-19	Jul-19	Aug-19	Sep-19	Oct-19	Nov-19	Dec-19	Jan-20	Feb-20	Mar-20	2019/20	Traffic Light	Target 2019/20	Comments
Leader's portfo	olio				1	1	1							1		g		
JtHR1	Working days lost due to sickness absence	10	10.7	9.4	7.4												10	83.5 working days lost for June + 469.50 (working days lost for April & May) = 553 553 / 297.74 (average FTE figure) = 1.86 / 3 x 12 = 7.44 average working
	working days lost due to sickness absence	10	10.7	5.4	7.4													days lost to sickness absence (cumulative). These figures relate to absence days from 21 employees 32.5 working days lost for June + 212.50 (working days lost for April &
ITHR12	Norking days lost due to short term sickness absence (up to 20 working days)	5	5.5	4.3	3.3											\checkmark	5	May) = 245 245 / 297.74 (average FTE figure) = 0.82 / 3 x 12 = 3.28 average working
																		days lost to short term sickness absence (cumulative). <u>The figures related to absence from 17 employees</u> 51 working days lost in June + 257 (working days lost for April & May) = 308
	Working days lost due to long term sickness absence (more than 20 working days)	5	4.9	5.2	4.1												5	308 / 297.74 (average FTE figure) = 1.03 / 3 x 12 = 4.12 average working days lost to long term sickness absence (cumulative).
Resources										1		I		l				This absence relates to 4 employees
SURB1	Speed of processing - new HB/CTB claims cumulative)	18	25.3	21.9	20.4												20	Performance is improved since April and on course to be back on target in the next couple of months.
G STOR B2	Speed of processing - changes of circumstances for HB/CTB claims (cumulative)	8	9.2	9.3	8.8												8	Performance is improved since April and on course to be back on target in the next couple of months.
SDRB3	Percentage of Council Tax collected cumulative)	98.0%	11.1	20.0	29.2											\checkmark	98.5%	Target achieved.
SbRB4	Percentage of non-domestic rates collected cumulative)	98.8%	11.8	20.3	29.0											\checkmark	98.9%	Target achieved.
Healthy Comm	Number of applicants with/expecting		1					[r –	1	[1	r –					
SbHS1	children who have been in B & B accommodation for longer than 6 weeks snapshot figure at end of month)	18	1.0	3.0	1.0												18	I household with/expecting children has been in B&B for over 6 weeks and is due to be moved to alternative self contained accommodation
SbHS7 a	Number of households living in temporary accommodation (snapshot at the end of the nonth)	68	50.0	53.0	48.0											V	68	Total of 48 comprises (i) Private Sector Leasing Scheme = 26 (ii) B&B = 10 (iii) Other nightly booked = 5 (iv) Bucks HA acquired properties = 3 (v) Other RP properties = 4
	Economic Development Processing of planning applications: major			1						1		1	<u> </u>	1			1	
SbPED9 a	applications processed within 13 weeks cumulative)	90%	100.0	100.0	100.0											\checkmark	90%	11 of 11 determined within target - cumulative figure 2 of 2 determined within target - this month's figure
SbPED10 a	Processing of planning applications: minor applications processed within 8 weeks cumulative)	85%	93.3	94.1	95.9											\checkmark	85%	47 of 49 determined within target - cumulative figure 15 of 15 determined within target - this month's figure
SbPED11 a	Processing of planning applications: other applications processed within 8 weeks cumulative)	85%	95.5	96.5	95.5												85%	191 of 200 determined within target - cumulative figure 52 of 56 determined within target - this month's figure
Environment								-			-							Q
SbWR2	Percentage of household waste sent for reuse, recycling and composting (cumulative)	53%	54.5	55.0	56.0											\checkmark	53%	191 of 200 determined within target - cumulative figure 52 of 56 determined within target - this month's figure Target achieved.

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Classification: OFFICIAL Appendix B - SBDC Quarterly Corporate Performance Indicator Report

Appendix B - Corporate PIs 2019-20 - SBDC

Code	Corporate PIS 2019-20 - SBDC Title	Target	Apr-19	May-19	Jun-19	Jul-19	Aug-19	Sep-19	Oct-19	Nov-19	Dec-19	Jan-20	Feb-20	Mar-20	2019/20	Traffic Light	Target	Comments
Leader's Portf	olio	2018/19	-													-	2019/20	
	Business Support																	
JtBS1 (C)	Availability of ICT systems to staff from 8am to 6pm (by period)	99.5%			98.9%											\checkmark	99.5%	Target achieved.
JtBS2 (C)	Percentage of calls to ICT helpdesk resolved within agreed timescales (by period)	95%			94.9%											\checkmark	95%	Target achieved.
SbBS3	Percentage of responses to FOI requests sent within 20 working days (by month)	90%	100.0%	91.4%	89.1%											\checkmark	90%	Just under target, but within threshold.
SbCS1	Number of complaints received (cumulative, quarterly)	80														NA	80	Although joint figures are currently available, these need to be further interrogated in order to gain solely the SBDC numbers.
SbCS2	New measure for compliments - t.b.a.	TBA	NA	NA	NA											NA	TBA	Currently working out how to report this.
JtLD1 (C)	Client satisfaction with the shared service. Percentage satisfied or very satisfied.	98%			NA											NA	98%	Not reported this quarter
SbLD1	Percentage of canvass forms returned	94%		1	1		1	r - r			1	1				NA	94%	Not reported this quarter
SbLD2	Standard searches carried out within 5 working days (cumulative)	100%	100%	100%	100%												100%	Target achieved.
SbLD3	Standard searches carried out within 10 working days (cumulative)	100%	100%	100%	100%											\checkmark	100%	Target achieved.
Healthy comn		0.404													r		0504	
SbCL1a SbCL1b	Customer satisfaction rating at the Beacon Centre.	84% 82%														NA NA	85%	Annual indicator
	Customer satisfaction rating at the Evreham Centre. Percentages of licences received and issued/renewed within statutory or					1		<u> </u>			[82%	Annual indicator
JtLI1 (C)	policy deadlines (cumulative). Percentage of food hygiene inspections of category A – D food	97%			99.1%												97%	Target achieved.
SbEH1	businesses achieved against the inspections due by quarter	91%			100%											\checkmark	96% 50%	Target achieved. Total number of premises at beginning of financial year = 20, number of
	Percentage of food premises improving their Food Hygiene Rating from 0-2 rating to achieve rating of 3 and above	NEW PI			5.3%											×	annual target / 12.5% per	premises closed = 1, number of premises improved = 1 Hasn't reached target, but is a cumulative indicator.
Ю ФНS2	Number of affordable homes delivered by (i) new build (ii) vacancies generated by local authority scheme (iii) acquisition of existing properties for social housing (cumulative)	22 5.5/qtr			30											\checkmark	22 5.5/qtr	Total comprises (i) 30 new L&Q units at Denham site (Howard House) (ii) 0 vacancies and (iii) o acquisitions
GAIS3	Average Length of stay in B & B temporary accommodation for all households (snapshot at end of period)	22			12											\checkmark	22	13 B&B placements ended during the quarter with an overall average stay of 12 weeks each
SbHS4	Number of private sector dwellings vacant for more than 6 months and returned to occupation following local authority intervention	15			•	•										NA	15	Annual indicator
SbHS9	Total Number of homelessness case decisions (monthly)	DATA ONLY	4	9	1											Data only	DATA ONLY	1 final duty decision issued (following completion of homelessness relief duty)
SbHS10	Number of homelessness cases accepted for main housing duty (monthly)	DATA ONLY	4	7	1											Data only	DATA ONLY	1 x case accepted for main housing duty
SbHS11	Average time to issue decision on all homelessness applications (monthly)	DATA ONLY	22	4	2											Data only	DATA ONLY	Decision issued within 2 working days following end of homelessness relief duty period
SbHS12	% of applications decided within 33 working days (monthly)	DATA ONLY	75%	100%	100%											Data only	DATA ONLY	Application was determined within 33 working days of end of homelessness relief duty
SbHS13	% of Homelessness Applicants who had a local connection to South Bucks (monthly)	DATA ONLY	75%	100%	100%											Data only	DATA ONLY	Applicant had local connection
SbHS14	% of Homelessness Applicants who had rent arrears on former tenancy (monthly)	DATA ONLY	0%	0%	0%											Data only	DATA ONLY	Applicant did not have former tenant arrears
SbHS15	% of Homelessness Applicants with multi-agency involvement (monthly)	DATA ONLY	75%	44%	0%											Data only	DATA ONLY	Applicant did not have multi agency involvement
SbHS16	Average length of stay in temporary accommodation (monthly)	DATA ONLY	7	14	14											Data only	DATA ONLY	9 placements in B&B/Nightly Booked accommodation ended during the month with an overall average stay of 14 weeks per placement
Planning and	Economic Development																	
JtBC1 (C)	Applications checked within 10 working days (cumulative)	92%	100%	95.3%	98.2%											\checkmark	92%	Target achieved.
JtBC2 (C)	Customer satisfaction with the building control service. (cumulative)	92%	100%	100%	100%					<u>.</u>						\checkmark	92%	Target achieved.
JtENF1(C)	Number of new enforcement cases received (monthly)	DATA ONLY	52	62	65											DATA ONLY		DATA ONLY Ö
JtENF2 (C)	Number of closed cases (monthly)	DATA ONLY	53	64	66							L				DATA ONLY	DATA ONLY	DATA ONLY
JtENF3 (C)	Number of PCNs (or S330s) issued (monthly)	DATA ONLY	0	0	0	<u> </u>										DATA ONLY	DATA ONLY	DATA ONLY
JtENF4 (C)	Number of notices served (monthly)	DATA ONLY	0	1	1			I					1			DATA ONLY	DATA ONLY	DATA ONLY

Classification: OFFICIAL Appendix B - SBDC Quarterly Corporate Performance Indicator Report

Code	Title	Target 2018/19	Apr-19	May-19	Jun-19	Jul-19	Aug-19	Sep-19	Oct-19	Nov-19	Dec-19	Jan-20	Feb-20	Mar-20	2019/20	Traffic Light	Target 2019/20	Comments
SbPED1	Percentage of planning applicants who are satisfied or very satisfied with	85%	NA	NA	NA											NA	85%	Service looking into how to carry these surveys out.
SbPED2	the planning service Planning appeals allowed (cumulative)	35%			9%											Ø	35%	Or 11 allowed or part allowed appeals (cumulative total) of 11 allowed or part allowed appeals (quarter total) Note: How this indicator is calculated has been revised. This includes, all appeal types. Appeals against -Refusal of planning permission, -Imposition of conditions -Non-determination -Enforcement notices All applications that have development types that are reported to the Government on the PS2 return and PS1, questions 6 and 7 and all appeals appeals
SbPED45	2020 Majors speed of planning decisions – special measures 2 year assessment period ending Sep 19 (cumulative, monthly)	60.00%	93.9%	94.4%	94.6%												60.00%	53 of 56 speed Applications determined: Major Decision period: Oct 2017 - Sep 2019 SPEED Taraet: 60% or more
SbPED46	2020 Non-Majors speed of planning decisions – special measures 2 year assessment ending September 2019 (cumulative, monthly)	70.00%	88.6%	89.0%	89.2%											M	70.00%	1683 of 1886 Applications determined: Non-Major Decision period: Oct 2017 - Sep 2019 SPEED Target: 70% or more
SbPED47	2020 Majors quality of planning decisions – special measures 2 year and 9 month assessment period ending December 2019 (cumulative, monthly)	9.99%	5.6%	5.6%	5.6%												9.99%	3 of 54 Application allowed/part allowed on appeal: Major Decision period: Apr 2017 – Mar 2019 Appeal period: Apr 2017 – Dec 2019 OUALITY Tarcet: less than 10%
Ped48	2020 Non-Majors quality of planning decisions – special measures 2 year and 9 month assessment period ending December 2019 (cumulative, monthly)	9.99%	0.6%	0.7%	0.7%											\mathbf{N}	9.99%	15 of 2283 Application allowed/part allowed on appeal: Non-Major Decision period: Apr 2017 – Mar 2019 Appeal period: Apr 2017 – Dec 2019 OLIALITY Tarnet: Jess than 10%
2 ©ED49	2021 Majors speed of planning decisions - special measures 2 year assessment period ending Sep 2020 (cumulative monthly)	60%	96.2%	96.8%	97.0%											$\mathbf{\Sigma}$	60%	32 of 33 speed Applications determined: Major Decision period: Oct 2018 - Sep 2020 SPEED Taraet: 60% or more
SbPED50	2021 Non-Majors speed of planning decisions - special measures 2 year assessment period ending Sep 2020 (cumulative monthly)	70%	93.3%	93.8%	93.8%											\mathbf{N}	70%	714 of 761 speed Applications determined: Non-Major Decision period: Oct 2018 - Sep 2020 SPEED Taraet: 70% or more
SbPED51	2021 Majors quality of planning decisions - special measures 2 year & 9 month assessment period ending Dec 2020 (cumulative monthly)	9.99%	0.00%	0.00%	0.00%											\checkmark	9.99%	0 of 42 Application allowed/part allowed on appeal: Major Decision period: Apr 2018 – Mar 2020 Appeal period: Apr 2018 – Dec 2020
Environment	Number of household collections missed per month (calculated by P&C	100														$\overline{\mathbf{A}}$	100	Transferrational
SbWR1	team on weekly basis)	100	97	94	94												100	Target achieved
SbWR4	No of missed assisted collections (monthly) Cumulative CO2 reduction from local authority operations from base	35	25	24	26											\square	35	Target achieved
SbSE1	vear of 2008/09	12%														NA	12%	Reported annually

SUBJECT:	FOOD AND HEALTH AND SAFETY BUSINESS PLANS
REPORT OF:	Healthy Communities – Councillor Patrick Hogan
RESPONSIBLE	Steve Bambrick, Acting Chief Executive
OFFICER	Martin Holt, Head of Healthy Communities
REPORT AUTHOR	Ian Snudden, 01494 732057, isnudden@chilternandsouthbucks.gov.uk
WARD/S AFFECTED	All

1. Purpose of Report

To obtain Members' approval for the adoption of the joint Food and Health and Safety Service Plan and Food and Health and Safety Enforcement Policies for the year 2019/2020.

RECOMMENDATIONS

- To approve the joint Food and Health and Safety Service Plan
- To approve the Food and Health and Safety Enforcement Policies

2. Reasons for Recommendations

The Food Standards Agency's (FSA) Code of Practice and the Health and Safety Executive (HSE) require local authorities to produce and publish an annual service plan that demonstrates how the authorities are working to deliver its food safety and health and safety services. The Office for Product Safety and Standards also requires local authorities to produce and publish their enforcement policies and to ensure that they comply with The Regulator's Code.

3. Report

The Food and Health and Safety Service Business Plan details how the food and health and safety enforcement services are to be delivered within both Chiltern District Council and South Bucks District Council areas for the year 2019/20.

The Service Plan is divided into the issues covered by the Food Standards Agency (FSA) Framework Agreement and the key priorities identified by the Health and Safety Executive's (HSE) Strategy Document. The Service Plan and Enforcement Policies are appended.

Food Safety Service 2019/20

Since the introduction of the national Food Hygiene Rating Scheme, the percentage of all eligible rated food premises (rating of 3 or better) continues to increase and is currently 96% for Chiltern and 97% for South Bucks District Councils, higher than the national average of 95.3%. Whilst the main approach to inspections is supportive, where businesses persistently fail to engage or improve standards, then more formal enforcement action will continue to be taken. Officers will continue to focus on the highest risk businesses and those that have a rating of 0-2. In 2018/19, significant enforcement activity took place and four food businesses

were successfully prosecuted with fines being issued in the Crown Court of up to £33,000 and substantial costs being awarded.

Specific areas of work have been identified in relation to continual service improvement and flexible mobile working and increased commercialisation of the service. The Food Standards Agency is still examining how regulatory interventions are delivered and is continuing to consult on its model 'Regulating Our Future'. The Agency is also issuing guidance to both local authorities and businesses in relation to preparation for the UK to depart the EU. Officers are also monitoring the impact that the UK's exit from the EU will have on food safety delivery and how services will be delivered in the future following the decision to move to unitary authority status. These are reflected in the service plan action plan.

Health and Safety Service 2018/19

Whilst health and safety remains a key priority for the Government, it aims to reduce the inspection burden on businesses. The consequence of this is that officers will only inspect businesses where there is a specific need, either due to local or national intelligence and the national strategic priorities. These priorities cover a range of sector specific interventions and cross-cutting themes. In 2018/19 enforcement action was taken against a number of animal petting establishments for poor hygiene and safety arrangements.

Food Policy and Health and Safety Enforcement Policy

Both polices reflect the principles set out in the Regulators' Code issued by the Better Regulation Delivery Office (now the Office of Product Safety and Standards). The key principles are to supporting growth, engaging with businesses, having a transparent and risk based approach to activities, sharing information between regulators and providing clear information and advice to businesses. The Regulators' Code applies to local authority regulatory services such as: environmental health, licensing, housing standards, planning enforcement, building control and revenues and benefits. A corporate enforcement policy has been developed and the policies have been drafted in accordance with this overarching policy.

4. Consultation

Not Applicable

5. Options

Not Applicable

6. Corporate Implications

- 6.1 Financial the service plan will be delivered within existing budgets
- 6.2 Legal The Food Standards Agency requires local authorities to produce and publish a food service plan, as does the Health and Safety Executive for health and safety and local authorities are audited by these Government bodies for compliance against the statutory guidance. The FSA audit reports are public documents and published on the FSA website.

7. Links to Council Policy Objectives

The plan stems from the Healthy Communities Service Plan and makes a positive contribution towards the Chiltern District and South Bucks Councils' *Joint Business Plan 2015 – 2020* and

Sustainable Community Strategy 2009 – 2026. The plan links into the Councils' Performance Management Framework.

8. Next Step

The approved action plan for the service plan will be implemented across both local authorities.

Background Papers:	It is a legal requirement that we make available any background papers
	relied on to prepare the report and should be listed at the end of the
	report (copies of Part 1 background papers for executive decisions must
	be provided to Democratic Services)

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CHILTERN DISTRICT COUNCIL and SOUTH BUCKS DISTRICT COUNCIL

Environmental Health Section

Joint Food and Health and Safety Service Business Plan

2019-2020



Classification: OFFICIAL

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1.0 INTRODUCTION

The joint Food and Health and Safety Service Business Plan outlines the nature, objectives and influences on the services and the statutory and policy framework within which the services are delivered. It sets out the key service priorities and objectives for 2019/20 and identifies the main issues planned to be addressed during the period. It also fulfils the requirements set down by the Food Standards Agency (FSA) in its 'Framework Agreement on Local Authority Food Law Enforcement' and the Health and Safety Executive (HSE) in its 'Section 18 Guidance to Local Authorities'.

2.0 SERVICE AIMS AND OBJECTIVES

2.1 Links to Corporate Objectives and Plans

The service contributes towards the Chiltern District and South Bucks Councils' *Joint Business Plan 2015 – 2020* and *Sustainable Community Strategy*, 2016-2026, performance measures and key objectives:

- Delivering cost-effective, customer-focused services;
- Working towards safe and healthier local communities ; and
- Striving to conserve the environment and promote sustainability.

2.2 Healthy Communities Service Plan

The key objectives within the Healthy Communities Service Plan that specifically relate to the food and health and safety service for 2019/20 are:

• Working to improve the worst performing food businesses

The Division has found substantial cost savings over the past few years, achieved by:

- reducing costs through innovative use of technology;
- reducing back office handling costs;
- transferring avoidable costs of delivery along the supply chain;
- raising income through charging for discretionary services;
- developing the new shared service and employing lean thinking principles to review processes;
- developing systems that will improve the ability of business to manage regulatory compliance whilst reducing the frequency of inspection.

2.3 Service Aims and Objectives

The Environmental Health Section has a significant role to play in improving quality of life, predominantly through providing a proactive, accessible and efficient service that protects and promotes the health of those who work, live and visit the area. This role directly supports the Councils' Key Objective 2 (*Working towards safe and healthier local communities*).

Our aim is to:

- support and assist businesses to become food safety compliant
- provide consistent accurate up-to-date information aimed at providing protection to customers
- support and assist businesses to comply with legal obligations to ensure that food is safe

We will achieve this by:

- targeted current relevant information to businesses
- ensuring officers are equipped with tools to effectively support businesses
- ensuring that poor performing businesses are proportionately targeted with enforcement action
- adopting a "light touch" approach to compliant businesses, organisations and customers
- campaigns to promote food hygiene ratings
- innovative opportunities and approaches to working with other regulatory stakeholders to improve businesses contact with local authorities.

2.4 Key Service Standards and Performance

As part of the authorities' key objectives, service standards and performance measures have been set.

Services are prioritised and resources targeted at issues of greatest concern in terms of food and health and safety. The service covers inspections of businesses, complaint and accident investigation and developing schemes to assist and motivate businesses to achieve compliance and good practice. The key corporate performance measures used are: '*Percentage of food hygiene inspections of food businesses category* A - D

achieved against inspections due' and 'Percentage of food premises improving their food hygiene rating from 0-2 rating to achieve a rating of 3 and above'.

Performance monitoring has been established with reports to relevant Committees, in addition to departmental monitoring meetings and to Management Team.

Food safety carries a high priority for the authorities and the targets set for 2019/20 (96% broadly compliant businesses within both Chiltern District and South Bucks District) reflect that priority and ensures that the authorities comply with current government guidance in measuring outcomes rather than inputs.

The Food Standards Agency will continue to collect data on broadly compliant businesses and as part of our continual service improvement; the intention is to collect data in respect of customer satisfaction following inspections.

As a consequence of Government's aims for health and safety reform including reducing the inspection burden on business and focussing on better health and safety outcomes, proactive inspections will be targeted at high risk premises where the national priorities identifies them as being an at-risk group or local intelligence identifies businesses with poor compliance records.

3.0 BACKGROUND

3.1 Profile

The Chiltern District is located in the centre of the Chiltern Hills, approximately 25 miles North West of London. The District covers an area of 19,635 hectares and has a population of approximately 93,980. It is predominantly a rural area with towns and villages set in countryside which is part of the greenbelt around London. A large part of the District forms part of the Chilterns Area of Outstanding Natural Beauty.

The South Bucks District covers an area of 14,150 hectares immediately to the west of Greater London with a population of approx. 68,560. The district is mainly rural in nature and large areas are within the Greater London Green Belt. The main towns in the district are Beaconsfield, Gerrards Cross Denham, Iver and Burnham.

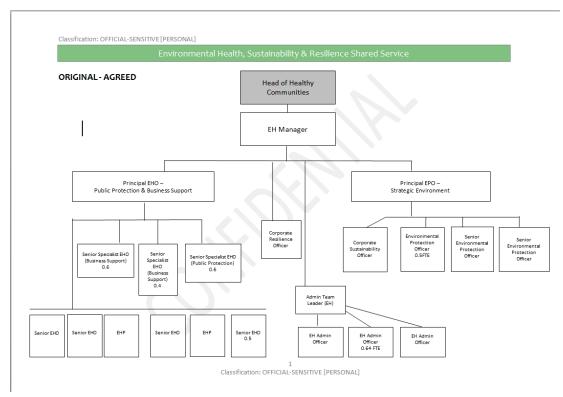
Both Districts have good transport links with adjoining areas. Both areas are served by good national and motorway networks. Direct rail-links to central London or Northwest to Aylesbury or High Wycombe and the Midlands are provided by Chiltern Railways, Great Western Railways and London Underground Ltd.

During 2019/20, Buckinghamshire local authorities will undergo both political and structural changes following the Government's decision to create a unitary authority for Buckinghamshire. This will have significant implications on the way in which all services will be delivered and the incorporation of District and County functions into a single service. This will take effect from 1st April 2020.

3.2 Organisational Structure

Since April 2014, a shared senior management structure has been in place between Chiltern District Council and South Bucks District Council, comprising a Chief Executive, directors and heads of service. The Head of Healthy Communities is the head of service for environmental health across both authorities and reports to the Director of Services. The shared environmental health service came into effect on 1st December 2015 with the service being delivered from both Council offices. The food and health and safety service is delivered by specialist Environmental Health Officers within a single Business Support Team. Health promotion is delivered by the Community Team who provide links to community development, adult learning and Learning and Skills although the Business Support Team will have an increasing role in delivering promotional activities.

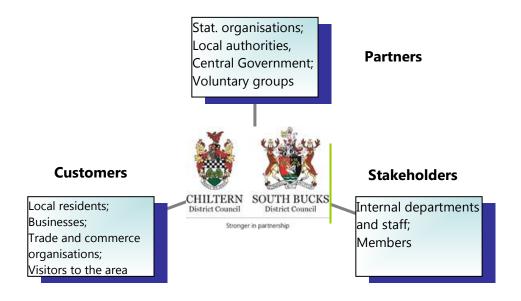
As of the March 2019, the Healthy Communities Division (inclusive of housing and licensing) comprised of 35.1 full time equivalents. The Division also employs specialist officers for Housing, Environmental Protection, Licensing, Emergency Planning and Business Continuity and Corporate Health and Safety, supported by a central administration team. In addition, the pest control service is provided on a contracted basis.



Dr Jill Morris is the appointed Consultant in Communicable Disease Control at Thames Valley Public Health England and is the 'Proper Officer' for the Authority.

The specialist officer for food safety as required by the Code of Practice is shared between the Principal Environmental Health Officer and a job shared Senior Specialist EHO post, and the Public Analyst is Anne Scarett at Hampshire Scientific Services.

3.3 Customers, Stakeholders and Partners



3.4 Scope of the Service

- 3.4.1 The scope of the service is:
 - i) the enforcement of legislation relating to safety, welfare and hygiene;
 - ii) routine auditing of businesses in accordance with current Government requirements;
 - iii) providing support, training and advice for food handlers and businesses, either free of charge or as part of a paid-for advice service;
 - iv) investigation of consumer complaints relating to food safety and hygiene;
 - v) investigation of employee and public complaints and requests for information relating to working environments and standards;
 - vi) investigation of reportable accidents;
 - vii) health education and promotional activities to educate the consumer.
- 3.4.2 The scope of infectious disease control aspects of the service are:
 - i) investigation of sporadic cases and outbreaks of infectious disease within the District, in consultation with the Consultant in Communicable Disease Control;
 - ii) health education/promotion activities;
 - iii) drawing up and implementing appropriate contingency outbreak control plans;

In addition, officers also enforce the smoke-free provisions, undertake inspections of businesses registered for skin piercing and contribute to the Safety Advisory Group.

3.5 Demands on the Food Service

As at 1st April 2019 there are 856 food premises requiring inspection in the Chiltern District and 630 in the South Bucks District. The premises profile is given in Table 1, whilst the number of premises falling into each risk category is given in Table 2. Classification of premises is in compliance with Food Standards Agency Code of Practice. Category A businesses, either because of the nature of their operation or poor standards of hygiene, pose a greater risk than category E. Those premises within category E are subject to an alternative enforcement strategy which takes the form of a self-assessment questionnaire. Similarly, a category D premise will alternate every 24 months between an inspection and self-assessment questionnaire. Category C premises that are broadly compliant will have a monitoring visit every other visit. Non-rated businesses are those whose risk rating has not yet been assessed.

Premises Type	Primary producers	Manufacturers and packers	Importer Exporter	Distributor	Retailer	Caterers
Number (Chiltern DC)	2	18	2	25	145	623
Number (South Bucks DC)	1	11	1	7	127	467

Table 1 Number of establishments by premise type

Table 2 Number of premises falling into risk categories

	A	В	С	D	E	Non - rated	Outside programme	Total
Number of premises (Chiltern DC)	1	25	157	197	380	38	17	815
Number of premises (South Bucks DC)	1	20	126	225	219	13	10	614
Interval between inspections (months)	6	12	18	24	AES			

• AES – Alternative Enforcement Strategy

Within the premises profile, there are four food businesses that are approved.

One of the strengths of the service is that of promoting and educating food businesses. This tends to be targeted at new businesses and those businesses that have got a history of poor hygiene standards and has proved effective in raising and maintaining standards. Those with a food hygiene rating of 0-2 are particularly targeted.

3.6 Demands on the Health and Safety Service

As at 1st April 2019 there were 2359 premises within the Chiltern District and South Bucks District areas which are eligible for health and safety enforcement. Classification of premises is in compliance with Health and Safety Executive/Local Authorities Enforcement Liaison Committee (HELA) Local Authority circular (LAC) 67/2 (rev8).

The assessment of the risk rating is dependent upon the identified health and safety hazards and their associated risks and the ability and confidence in the management to control them.

The service is delivered from both the Council offices in Amersham and Denham during normal office hours of 9.00 - 17.30. It is recognised that businesses operate outside normal office hours of work and so the inspection programme will take this into account. Officers are therefore expected to work outside these hours when circumstances require, for example, for food poisoning investigations and accident investigations, where the nature of the business dictates evening or early morning visits and upon request by businesses.

3.7 Enforcement Policy

A generic enforcement policy covers the majority of the work performed by the Division. However a more specific enforcement policy has been adopted and is detailed within the Food and Health and Safety Enforcement Policies, together with enforcement procedures that set out the actions to be taken when formal action is required.

Regard is given to the Regulator's Code published by the Department for Business Enterprise and Regulatory Reform (now the Office for Product Safety and Standards), the Primary Authority Scheme and the Councils' overarching enforcement policy.

4.0 SERVICE DELIVERY and REVIEW

4.1 Delivery and Priorities – 2019/20

The service will be delivered through:

- i) routine programmed inspection of food businesses, with a frequency determined by a risk assessment, with appropriate follow-up action;
- ii) proactive targeted inspections of businesses and service sectors where there is likely to be a greater risk of injury from those activities identified by national accident statistics and local intelligence with appropriate follow-up action.

- iii) assessment of relevant food hygiene premises to determine their food hygiene score in terms of the national Food Hygiene Rating Scheme and which will be published on the Food Standards Agency website;
- iv) routine self-assessment questionnaires to low risk premises;
- v) investigation of complaints with appropriate follow-up action;
- vi) investigation of accidents with appropriate follow-up action
- vii) participation in national and local sampling programmes;
- viii) appropriate training, development and monitoring of officers;
- ix) provision of information, coaching and advice to businesses about legal requirements and good practices;
- x) provision of relevant food safety courses for food handlers and a chargeable advice service to businesses;
- xi) promotional activities to inform and encourage high standards in businesses;
- xii) promotional activities to educate the consumer in food hygiene and safety.

Priority will be given to targeting those activities that pose the greatest risk to members of the public and employees by:

- i) the correct and uniform identification of high-risk areas during programmed inspections and as a result of complaint and accident investigation and to concentrate efforts to reduce these risks;
- ii) focussing enforcement efforts on those businesses who pose the greatest risks e.g. those that are not broadly compliant;
- iii) ensuring efforts are focussed on persistent offenders;
- iv) ensuring compliance with the law and;
- v) engaging in those promotional activities for businesses and consumers, which are most likely to foster improved safety.

Revisits to businesses will be undertaken in accordance with the relevant policy.

4.2 Food Safety Interventions

The policy relating to the inspection of food premises is detailed in the Food Policy.

The number of premises programmed for inspection in 2019/20 has the following profile:

Risk category	А	В	С	D	E	Unrated	TOTAL
					(AES)		
Number (Chiltern DC)	1	25	103	98	82	38	347
Number (South Bucks DC)	1	21	92	113	52	30	309

Currently 96% (Chiltern DC) and 97% (South Bucks DC) are broadly compliant with legislation. Those that are not broadly compliant will be subject to full inspections and included within the food sampling programme.

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A self-assessment scheme is undertaken for the lower risk premises whereby a questionnaire is sent to the business and on return an assessment is made as to its continued business use and risk. Dependent upon the outcome, the business will either by inspected or re-assessed when due another inspection. In creating more efficient, customer focused services, these questionnaires are sent out by email and an online form has been produced which enables easy completion and submission.

The revised Code of Practice introduced the opportunity to carry out alternative interventions where it is found that standards of food safety are generally good and do not warrant a full or partial inspection. Category A, B and C businesses which are rated as being not broadly compliant will be subject to a full or partial inspection or audit whilst category C and D food businesses that are broadly compliant could be subject to alternative interventions alternating with full or partial inspections every 18 months and 2 years respectively.

During 2018/19, the focus has been on the continued implementation of the shared service. To this end, policies and procedures of both authorities continue to be reviewed and developed, taking the best practice from each.

As part of an ongoing programme of service transformation, improved and more efficient and effective ways of working and delivering the service have been explored. Officers use iPads during inspections and produce much improved electronic reports for food businesses. These reports are designed to show a traffic light system of compliance and incorporate photographs thus making it clear to businesses what the issues are that need addressing.

Adequate separation between raw and ready-to-eat food being stored?	Yes		
Food protected from contamination in storage?	N/A		
Adequate stock rotation of food being stored?	No	A number of items found past their useby date on display for sale: 2 packets of pepperoni useby 30.04.18. 6 chicken in roast gravy pies useby 02 May 2018. 1 chicken samosa useby 30 April 2018. 1 beef salami best before 21.04.18. These were taken off sale by staff.	
Photograph 1 Photograph 2	And the second sec	Photograph 4	

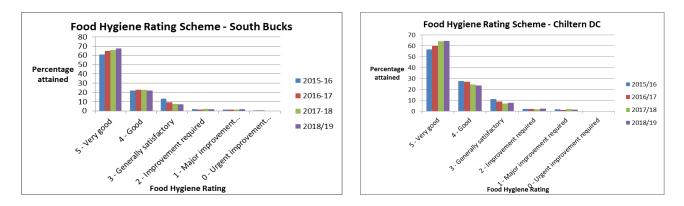
Officers trialled an app that connected with our back-office IT systems so that they would be able to view records and documents remotely. Unfortunately, due to various software issues, the trials did not demonstrate any additional benefits and so this aspect of our work has been put on hold. As part of the corporate customer

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experience strategy, work has been undertaken in developing a suite of online forms to improve access to our services.

The national Food Hygiene Rating Scheme (FHRS) continues to be well received by both the public and businesses. Businesses wishing to improve their rating following an inspection can apply for a re-inspection. From the 1st April 2017, local authorities have been able to charge for re-inspection requests to cover their costs; this is currently set at £150. Just Eat have recently changed the criteria by which food businesses can be on their database and as a consequence, we have seen an increase in the number of applications for re-inspections.

The graphs below show the percentage breakdown of food hygiene rating distribution across all rated food businesses within each authority. The aim is to increase those businesses that achieve a 5 rating to above the national average, currently at 70.81%. Both authorities have a greater overall percentage of broadly compliant food businesses than the national average of 95.31%.



Whilst improvements in hygiene standards continue to be made, officers are still seeing the impact of financial pressures on businesses and this is reflected in some businesses continuing to exhibit poor standards and a lack of investment in terms of staff training, maintenance and cleaning. Where there is found to be persistent problems over time, it is in the public interest to ensure hygiene standards are maintained and so officers will take a strong enforcement line in the form of the service of Hygiene Improvement Notices and prosecutions.

Where businesses attain a 0-2 rating, a revisit is always undertaken to gain compliance. If at this visit it is found that the business would improve their rating, they are encouraged to apply for a re-inspection. Whilst our performance indicator is to move businesses to be broadly compliant, this is reliant on them applying for a re-inspection which doesn't always happen, although, as mentioned previously, this is improving. Therefore a survey will be carried out this year of those poorer performing businesses to identify what blocks there are to applying. We will then endeavour to remove these blocks so that more businesses will apply and subsequently improve ratings.

Officers inspected 100% of food businesses category A-D that were due an inspection during 2018/19. In addition, four businesses were successfully prosecuted for an infestation of rats, poor food hygiene practices and management. In all cases

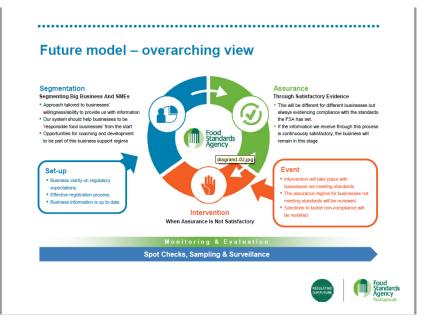
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enforcement action was taken including, in two cases, the emergency closure of the business and in another, the food business operator being prohibited from running any food business. In another case, a significant quantity of apple juice was seized and condemned by a Magistrate and disposed of.

The Food Standards Agency has embarked on a four year programme 'Regulating Our Future' to introduce a more effective system for food regulation. The two overriding priorities currently are preparing for the UK leaving the European Union and regulatory reform. With increasing pressure on resources and complexity of food supply, the FSA are currently consulting on how food businesses are regulated in the future so that consumers continue to have confidence in the food that is produced. This includes the mandatory display of the food Hygiene Rating Scheme scores in England, 'Permit to Trade' arrangements for new food business registrations, examining the role of third party audits and assurance schemes to inform the regulatory process and a greater use of the primary authority scheme.

As mentioned previously, there are four food businesses that are approved, two of which could particularly be impacted by the UK leaving the EU and so officers have been in communication with them in relation to their preparedness. We will also be assessing the implications for the service in relation to imported foods and regulation. No doubt all businesses will be effected in one way or another.

The FSA has proposed a new regulatory model which will move away from a 'onesize-fits all' inspection approach to regulation and the development of a regulatory framework that can be adapted according to different types of food businesses. Officers, through the Bucks Food Liaison Group, will continue to engage with the FSA in the new developments.



4.3 Health and Safety Interventions

The HSE Strategy 'Helping Great Britain Work Well' sets out 6 key themes:



A new strategy for health and safety **The six key areas**







Tackling ill health Highlighting and tackling the costs of work-related ill health

Falls from height

High volume Warehousing/Distribution³



Supporting small employers Giving SMEs simple advice so they know what they have to do



Keeping pace with change Anticipating and tackling new health and safety challenges



Managing risk well Simplifying risk management and helping business to grow



Sharing our success Promoting the benefits of Great Britain's world-class health and safety system

To support the strategy, guidance has been published for local authorities (LAC 67/2 (rev 8)) to aid the prioritisation of health and safety interventions. This identifies the national priorities based upon accident statistics and the associated high risk activities and business sectors. These will form the focus of our work during 2019/20. The guidance is clear however, that there should not be an inspection without a reason and that other alternative interventions may be more suitable, for example advisory visits, publicity campaigns and seminars.

		organisation should be subject to		10	Manual Handling	High volume Warehousing/Distribution ³	Lack of effective management of handling risks	
No 1	Hazards Legionella infection	High Risk Sectors Premises with cooling towers/evaporative condensers	High Risk Activities Lack of suitable legionella control measures, including premises that have: Not yet demonstrated the ability to	11	Unstable loads	High volume Warehousing/Distribution ³ Industrial retail/wholesale premises ⁴	Vehicle loading and unloading	
			 Not yet demonstrated the ability to manage their legionella risk in a sustained manner, includes new cooling towers/evaporative condensers, or 	12	Crowd management & injuries/fatalities to the public	Large scale public gatherings e.g. cultural events, sports, festivals & live music	Lack of suitable planning, manage monitoring of the risks arising from movement and behaviour as they leave and move around a venue	
			 Relevant enforcement action in the last 5 years and have not yet demonstrated sustained control of legionella risk. 	13 14	Carbon monoxide poisoning Violence at work	Commercial catering premises using solid fuel cooking equipment Premises with vulnerable working	Lack of suitable ventilation and/or appliances Lack of suitable security	
2	Explosion caused by leaking LPG	Communal/amenity buildings on caravan/camping parks with buried metal LPG pipework	Caravan/camping parks with poor infrastructure risk control/management of maintenance			conditions (lone/night working/cash handling e.g. betting shops/off-licences/hospitality ⁶) and where intelligence indicates that risks are not being effectively	measures/procedures. Operating where police/licensing: advise there are local factors incre risk of violence at work e.g. locate crime area, or similar local establis	
3	E.coli/ Cryptosporidium infection esp. in children	Open Farms/Animal Visitor Attractions ²	Lack of suitable micro-organism control measures	15	Fires and explosions caused by the initiation	managed Professional Firework Display Operators ⁷	have been recently targeted as pa criminal campaign Poorly managed fusing of firework	
4	Fatalities/injuries resulting from being struck by vehicles	High volume Warehousing/Distribution ³	Poorly managed workplace transport		of explosives, including fireworks			
5	Fatalities/injuries resulting from falls from height/ amputation and crushing injuries	Industrial retail/wholesale premises ⁴	Poorly managed workplace transport/ work at height/cutting machinery /lifting equipment					
6	Industrial diseases (occupational deafness/ occupational	Industrial retail/wholesale premises ⁴	Exposure to excessive noise (steel stockholders).					
	lung disease - silicosis)		Exposure to respirable crystalline silica (Retail outlets cutting/shaping their own stone or high silica content 'manufactured stone' e.g. gravestones or kitchen resin/stone worktops)					
7	Occupational lung disease (asthma)	In-store bakeries ⁵ and retail craft bakeries where loose flour is used and inhaliation exposure to flour dust is likely to frequently occur i.e. not baking pre-made products.	Tasks where inhalation exposure to flour dust and/or associated enzymes may occur e.g. tipping ingredients into mixers, bag disposal, weighing and dispensing, mixing, dusting with flour by hand or using a sieve, using flour on dough brakes and roll machines, maintenance activities or workolace cleanine.					
8	Musculoskeletal Disorders (MSDs)	Residential care	Lack of effective management of MSD risks arising from moving and handling of persons					

Vork at height

Category B and C premises will not form part of the inspection programme and so will not be subject to any proactive interventions unless they come within one of the priority subject areas or local intelligence suggests the need for targeted interventions.

4.4 Service Requests

The Food and Health and Safety Enforcement Policies detail the policy relating to the investigation of complaints, whether they are about hygiene standards at premises, complaints about food purchased within the Districts, safety standards at premises or welfare issues. In 2018/19 across both authorities, 48 food related service requests were received, 34 concerning the hygiene of premises and 14 in relation to food itself. Of the 34 health and safety related service requests, 10 were requesting advice whilst 14 concerned standards at premises. Both Chiltern and South Bucks Councils have established Safety Advisory Groups, the purpose of which is to collate information about an event to enable the emergency services to gauge its potential impact upon the local community, to identify beforehand any issues or concerns which may potentially arise and to give advice to event organisers. In 2018/19 111 consultations were held for a variety of events.

4.5 Accident Notifications

Under the Reporting of Injuries, Diseases and Dangerous Occurrences Regulations 2013, employers and self-employed are required to notify the enforcing authority of any notifiable injury etc. The table below indicates the level of accident notifications for 2018/19. The policy for the investigation of accidents is detailed in the Health and Safety Enforcement Policy and accidents are investigated according to the criteria within it.

Type of Accident	2018/19	2018/19 South				
	Chiltern DC	Bucks DC				
Fatal Injuries	0	0				
Non-fatal major injuries	0	0				
Over 7 day injuries	25	16				
Public injuries	30	23				
Dangerous Occurrence	1	0				
Total	45	35				

Number of accidents 2018/19

4.6 **Primary Authority Scheme**

In July 2009, the Regulatory Enforcement and Sanctions Act introduced the concept of a 'Primary Authority' for the majority of regulatory functions. At the request of a business, a local authority is compelled to act as that company's Primary Authority. The role of the Primary Authority is to act as a point of contact for other local authorities on policy issues, inspection programmes and when considering taking any enforcement action. The Primary Authority is able to prohibit that local authority from taking their enforcement action subject to an appeal process to the Office for Product Safety and Standards against the decision of the Primary Authority. The Business Support Team will actively pursue primary authority partnerships with local businesses and trade associations.

4.7 Advice to Businesses

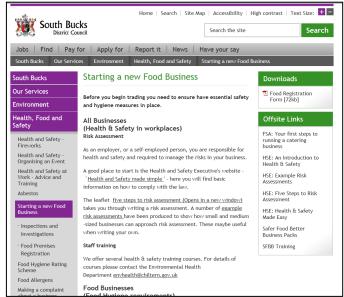
The authorities are committed to ensuring that businesses are aware of the requirements of the law and good practice, and will wherever resources permit, provide advice to assist businesses. Information fact sheets have been developed for businesses which have received positive attention from other authorities.

Greater links with local Chambers of Commerce and the Buckinghamshire Thames Valley Local Enterprise Partnership will be forged to support existing and new businesses and to improve awareness of the services Environmental Health can provide. For businesses, and in particular new start-ups, a 'one-stop' approach to regulatory services and compliance will be established in a bid to minimise the number of hand-ons a business may experience.



A chargeable advice service has been established aimed at new and existing businesses to support them in achieving higher standards of safety and compliance. A charge is made for those businesses who wish to have a re-inspection under the Food Hygiene Rating Scheme.

Eight Level 2 'Award in Food Safety in Catering' courses are planned each year delivered by an external tutor alternating between the Chiltern DC and South Bucks DC offices. Administration staff administer course provision the and manage the bookings and payment. The authorities retain the net income. Unfortunately, as in previous years, there has been little uptake of these types of courses, with businesses preferring to use online training. Not only is this



cheaper but it also frees up their staff time. As a consequence, we will investigate increasing the range of online courses. All courses are accredited by QCA and the Highfield Awarding Body for Compliance Ltd. These courses can also to be run for organisations at their premises upon request. The Section is also able to provide a range of Institute of Occupational Health and Safety (IOSH) courses and in particular, Leading Safely, Managing Safely and Working Safely.

In addition to advice being given to businesses, information is also provided for the public in the form of information on the website and participation in National campaigns.

4.8 Food Sampling

The policy in relation to sampling is detailed in the Food Policy and covers sampling of food, water and faecal and food samples as part of food poisoning investigations.

An annual sampling programme has been drawn up to cover:

- i) Water private supplies;
- ii) Food products manufactured locally;
- iii) National and regional co-ordinated sampling;
- iv) Imported foods;
- v) Locally co-ordinated sampling.

The sampling programme is based on the following objectives and an assessment of the potential risks associated with the particular activity:

- i) To obtain recognised and usable microbiological standards for foods, via a nationally co-ordinated sampling programme;
- ii) To fulfil legal and government driven obligations;
- iii) To monitor those businesses whose standards of hygiene are less than satisfactory;
- iv) To check that foods comply with statutory microbiological standards, where available;
- v) To check that locally manufactured and handled foods are microbiologically safe;
- vi) To identify specific foodstuffs which are more likely to be microbiologically unsound.
- vii) To form part of the non-inspection official control programme for broadly compliant food businesses.

It is recognised that good co-operation and co-ordination at a national and local level is necessary to achieve such objectives and the authorities are committed to:

- i) participating in and co-operating with the Public Health England and Food Standards Agency's national sampling schemes;
- ii) co-ordinating with adjoining local authorities and local PHE to agree locally co-ordinated sampling;

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iii) ensuring 10% of samples come from third country imported foodstuffs, in line with the Food Standards Agency requirements.

Sampling forms an important part of the inspection programme with lower risk, broadly compliant businesses being sampled rather than having a full inspection. This approach provides an efficient and effective use of officer's time, enabling greater focus on those businesses which continue to be non-compliant. Sampling is also performed on an adhoc basis as necessary, generally in response to a complaint from a member of the public, as part of a food poisoning outbreak or during a routine inspection.

As part of the revised inspection processes the use of ATP analysis of hand and food contact surfaces provides rapid assessments of cleanliness and cross contamination. As well as demonstrating potential failures in hygiene arrangements, the visual nature of these tests also aids the educational aspect of the inspection.

Samples for microbiological analysis continue to be taken to the PHE laboratory at Colindale, London. Routine private water supply samples for chemical analysis are sent to Chiltern Water and Environmental Ltd. and samples for examination will go to the Public Analyst.

4.9 Control and Investigation of Outbreaks and Food Related Infectious Disease

The policy for dealing with food related diseases is to:

"Prevent the spread of notifiable infectious disease in the community and particularly reduce outbreaks of food poisoning."

a) To investigate all outbreaks of notifiable disease within the Districts in co-operation with Public Health England.

- i) to identify the cause of infection;
- ii) to prevent the spread of infection;
- iii) to educate and prevent re-occurrence.
- b) Promote the training of food handlers.

Procedures have been developed in consultation with the Consultant in Communicable Disease Control and Thames Valley PHE Centre. These, together with the appropriate outbreak control plans are reviewed on a regular basis.

For 2018/19 149 sporadic cases of food related infectious disease were investigated across both authorities, a reduction on the previous year. All notified cases are followed up to identify the source and cause, and to establish whether the case is within a high-risk group. The number of food poisoning outbreaks investigated

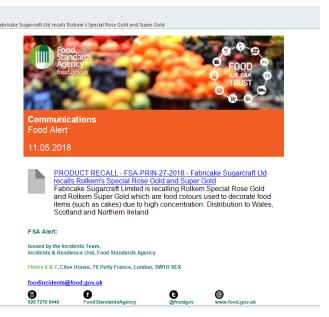
during the past year remains low. Such outbreaks involve a considerable amount of time and effort to investigate and control and as a consequence, other proactive work tends to be held in abeyance until the outbreak is concluded.

4.10 Food Safety Incidents

Food Alerts are the Food Standards Agency's way of informing local authorities and consumers about problems associated with food and, in some cases, provide details of specific action to be taken. They are often issued in conjunction with a product withdrawal or recall by a manufacturer, retailer or distributor. Officers will carry out action specified in the Food Alert as instructed and in the most appropriate, expeditious and cost effective manner possible to safeguard public health. Action will be taken in accordance with guidance issued by central government. Action taken in relation to food alerts associated with chemical contamination will be in consultation with Buckinghamshire and Surrey Trading Standards.

Rapid Alert System for Food and Feed (RASFF) is primarily a tool to exchange information between competent authorities on consignments of imported food and feed in cases where a risk to human health has been identified and measures have been taken. As with the food alert officers will carry out any action specified in the RASFF.

If a Food Alert or RASFF needs to be issued following complaints or issues arise as part of the routine inspection programme, the



guidance in the Code of Practice will be followed.

When necessary, the Consultant in Communicable Disease Control and Public Analyst will be consulted and advice sought as to the public health significance of particular issues. Specialist experts will also be called upon as necessary. Appropriate resources will be allocated to resolving any food safety incident and alternative measures taken to deal with other work.

4.11 Liaison with other Organisations

The Authorities have a number of formalised liaison arrangements with various public bodies and neighbouring local authorities. These include:

i) Buckinghamshire Food and Health and Safety Liaison Groups – bimonthly meetings to discuss current enforcement issues and to develop action plans to progress food and health and safety promotion and enforcement. Also in attendance are representatives from Trading Standards to discuss joint initiatives and the Quality Manager from the PHE, Colindale to discuss sampling results and programmes and the Health and Safety Executive.

- ii) Thames Valley PHE Centre meetings to discuss current infectious disease issues and to progress initiatives in outbreak control.
- iii) Chiltern District Council and South Bucks District Council Safety Advisory Group – meetings with event organisers to discuss event safety management and to highlight issues of particular concern.
- iv) Thames Water Utilities and Affinity Water 6 monthly meetings to discuss current developments in water quality and monitoring and to develop closer links between organisations.
- v) The Division also has links with other Council services e.g. Planning, Building Control and Waste Management.
- vi) Officers will also work and exchange information with other enforcement agencies such as HMRC and Thames Valley Police.
- vii) Participate in and contribute towards public health initiatives such as childhood obesity, smoking cessation and alcohol control.

4.12 Promotion

The value of safety promotions is recognised as an effective way of conveying safety information to both public and businesses and as a means of raising standards. Therefore when resources permit, officers actively participate in a number of promotions. These include Food Safety Week, Health and Safety Week and other local promotions organised on an adhoc basis through the Buckinghamshire Liaison Groups.

The national Food Hygiene Rating Scheme shows how well food businesses are complying with food hygiene law. The scheme applies to all caterers and retailers handling and preparing open food to the public. The food business is given a sticker to display that shows their food hygiene rating out of 5. The ratings are made publicly available on a national website so that customers can make informed



choices about the places where they eat out and purchase food, and through this, to encourage businesses to improve hygiene standards. Businesses are encouraged to display their rating.

5.0 **RESOURCES**

5.1 Staffing allocation

The food and health and safety service is delivered by a specialised Business Support Team who are responsible for undertaking food safety and health and safety interventions, investigations of accidents and hygiene complaints, food poisoning outbreaks and sporadic infectious disease cases and provide support and advice to businesses and the primary authority partnership scheme. The Team is comprised of Principal Environmental Health Officer, a job shared Senior Specialist Environmental Health Officer post, who, with the Principal EHO jointly act as the Lead officers for food and health and safety and 3.5 Environmental Health Officers, supported by 0.1 FTE Administrative Officers. Additional Environmental Health Officer resources will be deployed from the Public Protection team as required.

All officers are authorised in accordance with an assessment of their individual competencies and qualifications and in accordance with the FSA Code of Practice and Section 18. A record of authorisation for each individual is kept and any training and competency issues are dealt with throughout the year.

Contractors engaged in food or safety interventions will be appointed and authorised in accordance with the authorisation procedures and must demonstrate their competence to the satisfaction of the relevant codes of practice. During 2018/19 consultants were employed to undertake food hygiene inspections across both authorities, primarily in relation to new businesses.

5.2 Staff Development

The Authorities are members of the Investors in People (IIP) Scheme and are regularly appraised through audit of its membership.

The Food Standards Agency, as part of their revision of the Code of Practice, has introduced a Competency Framework for officers who are responsible for undertaking official controls. All officers authorised to carry out official control interventions will be required to complete the Competency Framework and any gaps will form part of their personal development plan.

All staff have an annual appraisal at which time any training and development needs are identified and incorporated into a training plan. Additionally, throughout the year, core courses are identified and staff allocated to attend as necessary. Staff have increasing access to online training and webinars. Not only does this plan reflect the business needs of the Division, it also provides for the personal development of individual officers. The Food Standards Agency's Competency Framework has been used to identify individual competencies and training and knowledge gaps.

All training undertaken is reviewed as to its usefulness and practical applications and feedback to other officers is done as necessary.

Following the annual appraisals, each officer receives individual aims and objectives. These comprise of general performance objectives relating to standards of work and targets to be achieved and more specific 'projects' pertinent to their work and the overall aims of the service. These are reviewed on an on-going basis and as part of the annual appraisal.

5.3 Financial Allocation

The budget for the food service is comprised of a number of elements, the greatest of which is staffing costs. This is followed by support services comprised of costs for administration, corporate services (mainly financial income administration), office running costs and internal health and safety. Legal charges are based on the actual work that is performed and a contingency is available for expert advice.

Microbiological analysis is undertaken by the PHE who has agreed an allocation of sampling units based on one food sampling unit per 1000 head residential population. Due to the extensive sampling programme, the Division tends to use its allocation of food sampling units.

5.4 Physical Assets

The officers involved in the food service are provided with any equipment that is deemed necessary for them to carry out their duties effectively and efficiently. A record of equipment allocated to staff is listed in an equipment inventory, which also includes a record of the necessary calibration and service checks. The value of these assets costed on a replacement value is estimated to be in the order of £2000.

5.5 Information Technology

The Division operates the Uniform database and management system supplied by IDOX and is used to log complaints, investigations and inspections. The system interfaces with the corporate Geographical Information System (GIS) and is based on the Local Land and Property Gazetteer. We also use Laserforms to provide consistency in enforcement notices.

All documents are scanned and linked to the Uniform record using the IDOX Electronic Document Management System which provides a more efficient management of information and data and improved access to information and business history. Additionally, the use of online application forms and payments improves both access to services by residents and businesses and efficiency.

During 2017/18, using iauditor software, officers developed templates for paperless inspection checklists and inspection reports for businesses which provide a clearer way of highlighting the key issues that need to be actioned using a traffic light system and incorporation of photographs. These templates continue to be developed and now include templates for verification visits, sampling health and safety projects.

A corporate flexible mobile working project has been rolled out to facilitate more efficient working across both authorities. Officers have the use of laptops and iPads to facilitate mobile working and the use of the iauditor software and Bluetooth keyboards has improved the efficiency of food hygiene inspections.

The ICT platform is currently Windows 7 using Microsoft Office 2010 software packages. Throughout 2019, new Windows 10 and Office 365 will be rolled out. These systems are supported by a dedicated ICT Department.

6.0 QUALITY ASSESSMENT

It is recognised that as well as ensuring that premises due for inspection are actually inspected, the quality of the inspection is of equal importance. By ensuring and maintaining the quality of an inspection, it becomes a more focussed, effective tool in securing food safety.

To this end, the quality of the service is monitored in accordance with the 'Inspection Monitoring Management System' in compliance with FSA Code of Practice. This sets out the measures that will be taken to ensure quality and consistency of approach to inspections, information provided and correspondence.

In order to attain and maintain a quality inspectorate, minimum qualifications and experience are set for enforcement officers. This is monitored regularly. Staff also undergo shadow inspections and peer review inspections/case studies. Regular file audits and action training sessions are also carried out to maintain quality, competency and consistency within the Section.

Additionally, Notices to be served and other enforcement work are verified by the Senior Specialist EHO (Business Support) or Principal Environmental Health Officer to ensure consistency with the Enforcement Policy and compliance with the Code of Practice and correspondence and files are monitored on a routine basis.

ACTION PLAN 2019/20

Task	Responsibility	Action	Success Criteria	Monitoring	Target
Continue to participate in the implementation of the corporate flexible mobile working project and to develop new innovative ways of working	EHM, PEHO, SSEHO (FS), SEHO	 Identify processes related to commercial premises inspections, accident investigations and service requests Identify service needs for mobile working and incorporate into existing and future IT solutions Implement new processes and procedures in terms of flexible working 	Flexible mobile working introduced across the Business Support Team More efficient, effective and streamlined service delivery.	Monthly review against project plan.	Ongoing
To participate in the development the creation of a new Buckinghamshire Unitary Authority in relation to the food and health and safety service	PEHO SSEHO (FS)	 Identify how the service may be affected as part of a Unitary Authority. Design and implement a project to incorporate Trading Standards functions within a new Environmental Health service Review policies and procedures in light of a combined food hygiene and standards service Continue dialogue with other District and County colleagues 	Project developed to bring together food hygiene and food standards functions Existing services maintained to a high standard Procedures and policies reviewed in light of change	Quarterly review against project plan.	March 2020

AppendixA

		 Ensure that existing services are maintained 			
Review the inspection process to improve hygiene standards in food businesses	PEHO SSEHO (FS)	 Implement a project designed to improve hygiene standards within targeted food businesses using a variety of tools, including Business Mentoring Toolkit for businesses Coaching and training Web information Score improver training Increased face to face contact time with businesses 	Increased number of food businesses that are Broadly Compliant	Quarterly review against project plan. Report on the percentage of businesses that are 'broadly compliant'	March 2020
Develop links with businesses through local trade associations, Chambers of Commerce and Bucks Local Enterprise Partnership (LEP) to improve support for businesses and provide an advisory service	PEHO SSEHO (FS) EHM	 Identify relevant Chambers of Commerce, Trade Associations and contacts within the LEP. Identify ways in which the service can work better with these organisations to better support local businesses. Develop service delivery in light of discussions with these organisations 	Better communication between local business representatives and the authorities. Changes in service delivery to better reflect business needs	Quarterly review against project plan.	March 2020
Develop Primary Authority arrangements with local businesses for both food and health and safety	PEHO SSEHO (FS) SEHO	 Actively pursue Primary Authority Partnerships In discussion with the particular business, develop 	Successful development and smooth implementation of the	Monitoring of food and health and safety complaints/enquiries and liaison with other	March 2020

		the Primary Authority Principle in line with government guidance.	Primary Authority Principle.	local authorities	
To develop and enhance the authorities' websites in relation to food and health and safety	SEHO/IT	 Identify ways in which the websites can be better used to provide information and guidance for businesses and to improve service delivery. Identify ways in which the websites can supplement the mobile/remote working project to provide more efficient and effective work practices. To review the content of the Councils' websites in relation to food and health and safety and amend, remove or add new information as necessary in light of changes in legislation, government guidance and Council changes. 	Websites enhanced – improved and readily accessible guidance and information available for businesses. Officers able to use website to improve their interaction with businesses and to enhance remote working. The relevant sections of the websites are up to date, relevant and readily accessible.	Quarterly review against project plan. Quarterly review of website information to ensure that information is still current	March 2020
Identify additional income streams for the department. Develop and deliver a chargeable advice service	PEHO SSEHO (FS) SEHO EHM	 Identify sources of additional income that can be exploited. Develop projects that can be marketed to businesses and other local authorities as an additional service. 	Increase in income. Projects identified and new services developed. Uptake of new services by businesses and local	Quarterly review against project plan.	March 2020

		 Produce a marketing plan and identify ways in which new services can be publicised and promoted. 	authorities. Business support valued by businesses, active participation on training courses. Increased uptake of food and health and safety courses.		
Ensure a programme of priority campaigns are carried out	All	 In line with the HSE Strategy and guidance, identify and deliver appropriate intervention projects Work to include development of website information, business seminars and targeted visits in collaboration with the HSE representative 	Identified projects delivered according to the project plan. Businesses increasingly aware of the priority topic areas and implementing recommendations.	Review meeting at end of project period. Briefing note provided on successes and lessons learned for future projects.	Ongoing
Report to the Food Standards Agency via the statutory return the percentage of businesses that are broadly compliant	PEHO SSEHO (FS)	 Using the FSA's LAEMS report, identify the percentage of businesses that are/are not broadly compliant. Target appropriate food safety interventions to increase the percentage of businesses that are 'broadly compliant'. 	Increasing percentage of businesses that are 'broadly compliant'.	Report on the percentage of businesses that are 'broadly compliant'.	Ongoing

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CHILTERN DISTRICT COUNCIL and SOUTH BUCKS DISTRICT COUNCIL

Environmental Health Section

FOOD POLICY

2019-2020



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- 1.0 Aims and Objectives
- 2.0 Standards for food related work
- 3.0 Food Hygiene Interventions
- 4.0 Enforcement Policy
- 5.0 Policy with respect to Complaints
- 6.0 Policy with respect to Sampling
- Appendix 1 Risk Rating Categories and Interventions
- Appendix 2 Service Standards

BACKGROUND

The Healthy Communities Division has a key role in working with businesses and consumers to ensure that food and drink intended for sale for human consumption, which is produced, stored, distributed, handled or consumed within the districts, is without risk to the health or safety of the consumer.

Whilst many incidents of food borne illness arise from visits abroad and poor hygiene awareness in the home, the need for high standards of hygiene within food businesses remains paramount particularly to engender public confidence and meet consumer expectations.

The Councils' approach to the enforcement of food safety reflects the responsibilities placed upon them by the Food Safety Act 1990, Food Safety and Hygiene (England) Regulations 2013, General Food Regulations 2004 (as amended), the Official Feed and Food Control (England) Regulations 2009 (as amended) and other regulations.

We aim to protect the public by delivering a complementary programme of education and enforcement which endeavours to ensure that food businesses within the districts are operated and maintained at a standard that complies with relevant legislation. We also ensure that our service fulfils the statutory duty imposed on the Councils as "food authorities" and to ensure the effective implementation of Government strategy on food safety issues.

Our enforcement policy reflects the Principles of Good Regulation set out in the Legislative and Regulatory Reform Act 2006, namely that regulatory activities should be carried out in a way which is transparent, accountable, proportionate and consistent; and that regulatory activities should be targeted only at cases in which action is needed. In drafting this policy, we have taken account of the Regulator's Code and the Councils' overarching enforcement policy.

It should be noted that during the life of this policy, Chiltern and South Bucks District Councils will form part of a new Buckinghamshire Unitary Authority. Therefore, any reference to either of the district councils or the county council after 1st April 2020 should be construed as being that of the new unitary authority.

1.0 AIMS AND OBJECTIVES

1.1 Aims

It is the Councils' aims for food safety to:

- protect public health and ensure that food intended for human consumption is safe
- support and assist businesses to **comply with legal obligations**
- provide consistent, accurate and up-to-date information aimed at providing protection to consumers
- provide effective and efficient regulatory services that meets customer needs
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1.2 Objectives

The Councils will achieve these aims in the following ways:

- Targeted, current and relevant information to businesses and consumers
- Ensure officers are equipped with tools to effectively support businesses to help them achieve good levels of compliance
- Target our enforcement activity on those areas which give rise to the most serious risks and concernsEnsure that poor performing businesses are proportionately targeted with support or enforcement action where appropriate
- Adopt a "light touch" approach to compliant businesses and organisations
- Proactive campaigns to promote food hygiene ratings

1.3 Service Delivery

The service will be delivered through:

- i) routine programmed inspections of food businesses, with a frequency determined by a risk assessment, with appropriate follow-up action;
- ii) assessment of relevant food hygiene practices to determine a food hygiene rating, in line with the national Food Hygiene Rating Scheme (FHRS). Premises are given a rating of between 0-5 and results are posted onto the Food Standards Agency website to provide clear, accountable evidence of visits;
- iii) routine self-assessment questionnaires to low risk premises;
- iv) investigation of complaints and incidents with appropriate follow-up action;
- v) participation in national and local sampling programmes;
- vi) appropriate training, development and monitoring of Council officers in accordance with Chapter 4 of the FSA Food Law Code of Practice;
- vii) provision of information and advice to businesses about legal requirements, good practices and what to expect of the inspecting officer/authority;
- viii) provision of relevant food safety courses for food handlers;
- ix) promotional activities to inform and encourage high standards;
- x) promotional activities to educate the consumer in food hygiene and safety.

1.4 Priorities

Priority will be given to targeting those activities that pose the greatest risk to the consumer arising from the consumption of food. This will be by:

- the correct and uniform identification of high-risk processes during programmed inspections and other interventions, including complaint investigation and to concentrate efforts to reduce significant risks;
- focussing enforcement efforts on those businesses that pose the greatest risks e.g. those that are not broadly compliant;
- ensuring efforts are focussed on persistent offenders;
- ensuring compliance with the law and;
- engaging in those promotional activities for businesses and consumers which are most likely to foster improved safety.

2.0 STANDARDS FOR FOOD RELATED WORK

2.1 Authorisations

The Councils will set standards for the qualifications, experience and competence of its officers.

In the context of the Food Safety Act 1990 and Regulations under the European Communities Act 1972, an authorised officer's powers include the inspection of food premises, the inspection, detention and seizure of food, the service of notices and taking emergency action. Authorised officers will be authorised in accordance with the Food Safety Law Code of Practice.

Under the Chiltern District Council and South Bucks District Council's Constitution has delegated authority to exercise the Councils' functions, powers and duties in relation to food safety.

The Director of Services and Head of Healthy Communities, in exercising their authority to appoint authorised officers, will apply the standards contained in this policy.

2.1.1 Inspections

The inspection of food premises will only be undertaken by officers who are suitably qualified, experienced and competent in accordance with the requirements of the Food Law Code of Practice pertinent to their duties. This will equally apply to those employed on a contract basis. Inspectors will be authorised in accordance with the 'Authorisation and Training Procedure'.

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Newly appointed officers or currently employed officers who are extending their duties will not be authorised unless they are qualified as above, that they possess the appropriate competencies, skills, qualifications and experience to undertake their duties and that they have undergone a period of structured training in accordance with the Code of Practice. The assessment of competency etc. will be undertaken by the Senior Specialist Environmental Health Officer (Business Support) in consultation with the Principal Environmental Health Officer.

2.1.2 Enforcement Notices

Service of Hygiene Improvement Notices will only be undertaken by qualified officers with experience in food law enforcement, in accordance with the Food Law Code of Practice and after consultation with the Senior Specialist Environmental Health Officer (Business Support) or Principal Environmental Health Officer.

The service of notices by hand will be by any person who is capable of explaining the meaning and legal status of the notice. Notices served by other methods will be in accordance with current legal guidance.

The Environmental Health Officers will be authorised to serve Hygiene Emergency Prohibition Notices in accordance with the standards within the policy. Where practicable, he/she will be accompanied by another EHO to corroborate the proceedings and will consult with the Senior Specialist Environmental Health Officer (Business Support) or Principal Environmental Health Officer.

2.1.3 Seizure and Detention of Food

Environmental Health Officers will be authorised to inspect, detain and seize foodstuffs subject to experience and competence.

All officers will be assessed for the necessary practical skills, experience and competency by the Senior Specialist Environmental Health Officer (Business Support).

2.1.4 Competency

The Principal Environmental Health Officer has been given specific responsibility for food hygiene and food safety matters and managing the food safety service. This will be in accordance with the documented '*Food Safety Monitoring Procedure*'.

Environmental Health Officers and Environmental Health Technical Officers will carry out inspections and exercise their powers in accordance with the relevant legislation, Food Law Code of Practice and within the restrictions of their authorisation.

The Senior Specialist Environmental Health Officer (Business Support) (or in his/her absence, the Principal Environmental Health Officer) will be responsible for the supervision and training of officers and for the maintenance of auditable records.

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The FSA Competency Framework will be used to establish current qualifications and competencies and to identify future training needs in order that officers can effectively carry out their duties.

Recommendations will be made by the Principal Environmental Health Officer or Senior Specialist Environmental Health Officer (Business Support), to the Head of Healthy Communities in respect of the powers to be given to officers and the category of premises to be inspected.

A list of the officers, their powers and the category of premises which the officer may inspect, will be maintained and regularly updated in an 'Authorisations Manual'. Records of training will also be kept.

Other officers may be appointed to assist in carrying out inspections.

2.2 Guidance

The authorities will have regard to the Food Law Code of Practice and Guidance issued by the Food Standards Agency, other advice issued by the Government, advice issued by the Office of Product Safety and Standards, information and guidance issued by a Primary Authority and any approved Industry Guides.

2.3 Approvals

Some specific food premises are required to be formally approved by the local authority. They are then given an approval number that specifically relates to their premises and products and can then use the "health mark" required by EC Directives.

The Head of Healthy Communities, in consultation with the Principal Environmental Health Officer, has the authority to issue or revoke such approvals.

Other suitably qualified and experienced officers will be designated as being able to approve premises which will be assessed and recorded as in 2.1, above. The ability to revoke approvals will remain solely within the authority of any of the two officers named above.

2.4 Licences and Registrations

Under the Chiltern District Council Constitution, the Head of Healthy Communities has delegated power to issue licences and registrations pursuant to Section 19 of the Food Safety Act 1990 and to refuse or revoke licences in accordance with Regulations and any guidance issued. This function is delegated to the Director of Services in South Bucks District Council. This will be in consultation with the Principal Environmental Health Officer.

2.5 Uniformity

The Authorities acknowledge the need to act in a consistent and uniform manner and advocate a common-sense approach to the selection of enforcement action and activities.

The following areas are all considered important in achieving uniformity. These are detailed in the *'Inspection Monitoring Management System'*:

- i) the awareness, adherence to and review of the food policy document and further development of office procedures;
- ii) training, qualifications, supervision of staff. Regular practical training and update sessions will be essential to ensure uniformity;
- iii) cross monitoring visits of staff;
- iv) use of the Primary Authority Partnership Scheme, specified by the Office of Product Safety and Standards;
- v) liaison with local food groups/adjoining authorities. Use of joint training initiatives. Co-operation and joint working on uniformity issues;
- vi) compliance with the Code of Practice and guidance.

2.6 Advice to Businesses

The Authorities are committed to ensuring that food businesses are aware of their legal obligations and to supporting businesses in achieving best practice by providing coaching, training and appropriate advice.

In responding to requests, the advice given should support compliance and be reliable. On a quarterly basis, the information on the Councils' website will be reviewed in light of changes in legislation and government guidance. Requests for advice should not necessarily trigger enforcement action but should be a means to forge positive relationships with businesses.

Where opportunities arise to provide advice and guidance to businesses over and above that required to ensure legal compliance, e.g. to increase a business' food hygiene rating or to establish 'best practise' for supplier auditing purposes, then a charge may be made.

Where a charged advisory service is provided to a business and significant risks are identified which pose a serious and imminent risk to health, these will be brought to the attention of the business for immediate action to rectify. Officers will be expected to ensure that action is taken by the business and if not, appropriate enforcement action will be taken. Steps will be taken to ensure that there is no conflict of interest between officers providing the advice and those undertaking routine enforcement work.

Where advice is provided by another agency, e.g. Trading Standards at the County Council, then the business will be appropriately signposted. In relation to allergens in food, officers will provide advice in respect of non-pre packed food. All other

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requests for guidance and information will be referred to Buckinghamshire County Council Trading Standards. Officers will not make direct referrals.

In particular:

- businesses will be encouraged to acquire food hygiene training. To assist in this, Level 2 Food Hygiene courses will be run by or in partnership with, the authorities for as long as demanded, on a cost recovery basis in order to encourage attendance. In addition, a range of online courses are also available. A charitable organisation will be able to benefit from 2 discounted group courses per year, after which they will be charged at the going rate for group bookings. At all times it will be made clear that there is no legal requirement to attend the course run by the Councils;
- the Councils' websites will be the primary source of information to assist businesses with interpretation of legislation or good practice. The Councils also provide services for ethnic minority groups through 'Language Line' translation services and courses in languages other than English. Where the Councils do not provide the service themselves, information will be given to businesses about other providers.
- iii) a chargeable advice service may be available to new and existing food businesses to support them in achieving high standards of safety and compliance.
- iv) businesses will be supported and encouraged to participate in the Primary Authority Partnership Scheme where applicable.
- v) coaching and mentoring visits will be made to businesses in order to raise standards of hygiene by focussing on issues identified during primary inspections. Appropriate toolkits will be used to assist effective delivery of information.
- vi) where there is sufficient demand occasional talks will be given to businesses. Charges to cover costs may be made for out of hour's sessions.

2.7 Advice to Consumers

The authorities are committed to assisting consumers to understand basic hygiene in the home and to providing consumer confidence in local food businesses. The Councils' website will provide access to advice and information on food safety issues and will be reviewed on a quarterly basis. The authorities will participate in national food safety activities and local events and promote the national Food Hygiene Rating Scheme. Talks to voluntary organisations and groups will be given free of charge where resources permit.

2.8 Conduct

Inspecting officers will at all times act and dress in a professional manner. Protective clothing will be worn that is appropriate to the premises being inspected and equipment will be maintained and calibrated where appropriate.

Officers will ensure the highest standards of personal hygiene and will not act in such a way as to pose a risk of cross contamination or to health.

2.9 Information Sharing

Where the legislation permits, the authorities will share information via agreed secure mechanisms with other regulatory agencies and local authorities about businesses to help target resources and activities and to minimise duplication.

The authorities will share information about businesses with the primary authority as appropriate and with other authorities when acting as a Primary Authority.

The authorities will, where feasible, follow the principle of 'collect once, use many times' when requesting information from businesses.

3.0 FOOD HYGIENE INTERVENTIONS

3.1 Premises

An up to date record will be kept and maintained on a computer database of all known food premises, together with the food register required by law. All known food businesses will be assessed for the need to be included on the planned programme of inspection based on information obtained from the food business operator or following inspection.

Newly registered high risk food businesses will be inspected within 28 days following receipt of the application for registration. Any longer period should take account of the nature of the business and prior knowledge of the level of managerial competence.

3.2 Frequency and type of inspections

Over the last few years there have been a series of regulatory reforms, which aim to reduce red tape and regulatory burdens upon business. In light of the regulatory reviews it has been recognised that "a key element of their activity will be to allow, or even encourage, economic progress and only to intervene when there is a clear case for protection." The reviews also stated that "The few businesses that persistently break regulations should be identified quickly and face proportionate and meaningful sanctions."

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Article 2 of EC Regulation 882/2004, states that, it is possible to undertake Official Controls by means other than the traditional food hygiene inspection. It goes on to recognise five other activities (classed as interventions) which are deemed to meet the requirements of an official control at a food business. They are; Inspections, Audit, Sampling, Monitoring, Surveillance and Verification. The Food Standards Agency also identifies other ways of assessing and encouraging low risk businesses to be compliant such as by coaching, advice and training.

Article 2 of Regulation 882/2004 provides the following definitions of official controls:

'Inspection' means the examination of any aspect of feed, food, animal health and welfare in order to verify that such aspect(s) comply with the legal requirements of feed and food law and animal health and welfare rules.

'Monitoring' means conducting a planned sequence of observations or measurements with a view to obtaining an overview of the state of compliance with feed or food law, animal health and animal welfare rules.

'Surveillance' means a careful observation of one or more food businesses, or food business operators or their activities.

'Verification' means the checking, by examination and the consideration of objective evidence, whether specified requirements have been fulfilled.

'Audit' means a systematic and independent examination to determine whether activities and related results comply with planned arrangements and whether these arrangements are implemented effectively and are suitable to achieve objectives.

'Sampling for analysis' means taking feed or food or any other substance (including from the environment) relevant to the production, processing and distribution of feed or food or to the health of animals, in order to verify through analysis compliance with feed or food law or animal health rules.

In light of this, the Food Safety Code of Practice, to which officers must have regard when inspecting food businesses, allows authorised officers and food authorities to use a range of interventions, using strategy and officers' professional judgement to determine the most suitable level of intervention, proportionate to the activities of the food business. The range and scope of interventions is detailed in *Appendix 1*. In determining the inspection approach, officers will take into account the compliance record of the business and any other earned recognition and third party verification in place. Officers have been given training and regular reviews are in place to ensure consistency in this approach. Interventions are defined as activities that are designed to monitor, support and increase food law compliance within a food establishment. More intensive regulation will be directed at those food businesses that pose the greatest risk.

Systems will be maintained to monitor inspection frequency against the planned

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programme. All visits will be recorded on the computer-based system and documents scanned to the corporate Electronic Document Management System.

3.3 Inspection Procedure

3.3.1 Approach

The authorities will work to the standards in the Food Law Code of Practice and Guidance and the internal inspections procedure documents.

The main purpose of inspection is to identify potential risks to food safety or which are likely to give rise to food poisoning and to ensure that the business understands the risks and has put the necessary measures in place to minimise them. When undertaking an intervention, officers will pay particular emphasis to HACCP based management systems. However it is recognised that the seven HACCP principles are a model towards compliance and that the legislative requirement can be achieved by other simplified, effective equivalent means.

A systematic approach to risk assessment will be adopted based on The Food Safety and Hygiene (England) Regulations 2013. Where businesses have identified their own critical points for food safety and have introduced controls, the intervention will focus on the accuracy of the critical points assessment and on the effectiveness of the controls. Written assessments will normally be expected in high risk or complex businesses. Low risk or simple businesses will not be expected to have written or elaborate assessments although the use of Safer Food, Better Business will be promoted where appropriate.

Where no assessment by the business can be demonstrated the inspection will focus on the officer's own critical points assessment and examination of controls. In accordance with government advice on enforcement, formal action will be considered where an informal approach has been unsuccessful in achieving compliance with the food safety management requirements.

The whole of a premise may not necessarily be inspected at each inspection; those areas of greatest risk will be given priority. Where the inspection varies from government guidance or departmental procedures, this will be recorded.

Computer records will be updated following every visit.

A Memorandum of Understanding exists between the County and District Councils where they jointly have powers to enforce a particular piece of legislation e.g. with Trading Standards, then officers will liaise with the County Council to discuss the most appropriate course of action. In relation to enforcement of allergen information (Food Information Regulations 2013), officers will check for compliance when undertaking programmed official food controls and issue advice and guidance where there is non-compliance. Officers may seek formal compliance by taking enforcement where regulatory action for other food safety matters is being carried

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out.

3.3.2 Communication

Every intervention (including those where no defects are identified) will result in a written report to the proprietor. Copies of the report will be sent to the Manager or other relevant persons. The report will comply with the requirements of the Code of Practice and advice will be in line with guidance and relevant Industry Guides to Good Hygiene Practice issued by central government.

A standard format will be used. The report will cover the important issues noted during the inspection and will clearly distinguish between legal requirements and recommendations. It will give details of the person carrying out the inspection, date, time, the areas inspected, the FHRS rating where possible and the procedure if the proprietor disagrees with the issues raised in the report.

Good communication between inspector and proprietor/manager is essential wherever possible, including ensuring that the purpose and scope of an inspection is understood and the "works" needed following the inspection with an agreed time limit. The impact of the advice should be considered so that it does not impose unnecessary burdens upon businesses.

3.3.3 Timing of Inspections

Programmed inspections will be carried out at all reasonable hours. It is recognised that food businesses operate outside normal office hours of work and so the inspection programme will take this into account. Food businesses operating outside of 'normal' office hours will, on occasions, be inspected at times when different activities occur to that in the day time.

Programmed inspections will normally be unannounced with the following exceptions:

- i) where officers are unlikely to gain access without notifying the proprietor e.g. sports clubs, small home caterers, church halls etc.;
- ii) where security measures are in existence;
- iii) if full information is not able to be gained at the unannounced visit, an appointment may then be made to discuss the issues further, e.g. specific HACCP documentation, advice from a technical manager at a large manufacturer.

Notice will not be given where complaints are being investigated.

Revisit dates may be notified in advance as an aid to ensuring that works are completed and to facilitate further discussions with the proprietor.

Where alternative dates for visits are requested by a business the inspector may

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agree, if suitable justification is given, and the inspector is satisfied that the purpose behind the request is not to conceal a major risk. Where the officer suspects that the intention is to hide a serious offence he/she should agree to have a quick inspection and then agree a full visit at a later date.

3.3.4 Revisits

Revisit inspections will be arranged to check on matters raised during an inspection (and any obvious extra defects) where there are *significant* contraventions and/or serious risks to public health and to check on compliance with statutory notices. They will not turn into a further full inspection except where a major risk is identified. Where significant breaches of hygiene regulations have been identified, the revisit should whenever practicable be undertaken by the same officer who undertook the initial visit. After initial inspections, employers must be made aware that a revisit will be made and appropriate dates discussed.

Revisits will not always result in a written report (unless further work is required) to the proprietor/manager although the proprietor/manager will always be advised of the outcome verbally, and in writing if requested. However, detailed records of revisits will be made and kept on the computer property database. Records will be maintained of formal and informal notices which have been complied with.

For premises with a FHRS score of 0, 1, or 2, a 2 phase revisit process will be implemented. This will apply to those businesses who have contraventions that are likely to affect the safety of the food being served, producing an 'unsafe contravention'. Where necessary, enforcement action will be taken in accordance with the Enforcement Policy. After the inspection, the business will receive a 1st revisit that will involve a coaching session in the areas that they have scored poorly on. A range of tools have been developed to aid officers when coaching these businesses. The business will then, if necessary, be given time to implement the changes before another revisit is made. Dependant upon the nature of the outstanding requirements, and the past history of the Food Business Operator, for the 2nd revisit, this may be able to be achieved over the phone. This process will only be implemented for non-compliant businesses that have not received any coaching or mentoring in the past. Should businesses fail to maintain their compliance during subsequent inspections, then enforcement action will be taken in accordance with the Enforcement Policy.

Where a re-inspection under the FHRS is requested, this will be in writing and supplemented with supporting evidence in order to establish whether adequate measures have been put in place to warrant a re-inspection. Re-inspections will generally be un-announced and will take place within 3 months of the request for re-inspection and the business re-rated according to the hygiene standards found at the time. Distinction will be made between those *re-visits* necessary to ensure compliance and to address food safety issues and those *re-inspections* at the request of the Food Business Operator to re-rate the business under the FHRS.

4.0 ENFORCEMENT POLICY

This section sets out the policy relating to the general principles of enforcement in relation to food safety and is drafted in accordance with the overarching Corporate Enforcement Policy. It embraces the principles set out in the 'Regulators' Code' issued by the Better Regulation Delivery Office (now the Office for Product Safety and Standards).

More specific procedures concerned with statutory notices, emergency action, formal cautions and prosecutions are detailed in enforcement procedures. These procedures take account of all Codes of Practice and 'The Code for Crown Prosecutors'

Enforcement officers by necessity as professional officers have considerable discretion in decision making and initiating enforcement action. Such action can range from informal advice, information and support through to formal enforcement mechanisms, including the use of statutory notices and prosecution.

This part applies to all dealings, formal and informal, between officers and businesses, all of which contribute to securing compliance with the law. It will provide policy standards, aid professional judgements and decision making and ensure both consistent and effective enforcement.

4.1 Principles of Enforcement

The core expectation for those we deal with, quite reasonably, is for us to be professional, fair, co-operative and consistent in our approaches. Businesses and the public also expect local authority actions to result in the remedying of potentially risky situations and for those guilty of serious offences to be adequately punished.

We will adopt a positive and proactive approach towards ensuring compliance by:

- i) helping and encouraging businesses to understand and meet regulatory requirements more easily without imposing unnecessary additional cost;
- ii) assess whether other social, environmental and economic outcomes can be achieved by less burdensome measures, and
- iii) responding proportionately to regulatory breaches.

Enforcement should be informed by the principles of **proportionality** in applying the law and securing compliance; **consistency** of approach; **targeting** of enforcement action, **openness** about how we operate and what businesses may expect and **helpfulness** in providing advice and assisting with compliance.

Appendix 2 sets out the standards of service businesses should expect to receive.

It will be expected that enforcement officers, when making decisions and communicating with businesses will follow these principles, together with relevant codes of practice and guidance. The Primary Authority partnership scheme will be

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used where appropriate.

Any departure from this must only occur when the following criteria are complied with:

- i) in exceptional circumstances;
- ii) where actions are capable of justification;
- iii) where there has been full consultation with the Principal Environmental Health Officer or Environmental Health Manager.

Any sanctions or penalties being considered should:

- aim to change the behaviour of the offender;
- aim to eliminate any financial gain or benefit from non-compliance;
- be responsive and appropriate for the particular offender and regulatory issue
- be proportionate to the nature of the offence and the harm caused;
- aim to restore the harm caused by regulatory non-compliance, where appropriate; and
- aim to deter future non-compliance

This policy will be reviewed periodically in response to new legislation and guidance issued by central government departments.

4.1.1 Proportionality

All enforcement actions and advice must be proportional to the risks posed to the public and the seriousness of any breach of legislation.

When considering enforcement action, consideration should be given to the cost of measures required to reduce the risk weighed against the benefit to be gained by reducing the risk. Consideration should be given as to the impact upon small businesses.

In addition, there should be a staged approach to enforcement action with increasing degrees of enforcement as management of businesses fail to respond to previous requests. Officers should provide an opportunity for dialogue in relation to the advice, requirements and decisions.

The only exceptions to the above approach would be where a serious and/or imminent risk to public safety or health exists.

The staged approach to enforcement is further detailed in the enforcement procedures.

4.1.2 Consistency

Consistency of approach does not mean uniformity. It means taking a similar

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approach in similar circumstances to achieve similar ends.

Businesses expect consistency from enforcing authorities in advice given, the use of statutory notices, decisions on prosecution and responses to complaints. It is recognised however, that in practice it is not simply due to the wide range of variables faced. Therefore it is expected that officers will use their professional judgement and exercise discretion, in conjunction with this policy, when coming to a decision on appropriate action.

Enforcement officers will however have the following arrangements in place in order to promote consistency of approach: -

- i) Officers will perform validation exercises relating to joint inspections on an annual basis;
- ii) The Senior Specialist Environmental Health Officer (Business Support) will accompany all officers on a minimum of one initial inspection per year to assess the consistency of approach between officers;
- iii) Officers openly discuss cases at team meetings and/or with the Senior Specialist Environmental Health Officer (Business Support)to provide a consensus of opinion;
- iv) Formal action will be 'signed off' by the Principal Environmental Health Officer
- v) Where there is a need for clarification, approaches will be made to the Bucks Food Liaison Group;
- vi) Officers will participate in inter-authority consistency exercises and change working practices, if necessary, to achieve consistency;
- vii) Chiltern and South Bucks District Councils will take an active role in the Bucks Food Liaison Group;
- viii) Reference will be made to appropriate central government guidance;
- ix) Reference will be made to appropriate guidance issued by a Primary Authority;
- x) Where inconsistencies arise, appropriate training will be given by the Senior Specialist Environmental Health Officer (Business Support).

4.1.3 Targeting

Inspections and enforcement action will be targeted primarily on those activities giving rise to the most serious risks or where hazards are least controlled and that action is focussed on those responsible for the risk and who are best placed to control it.

The prioritisation of inspections will be based on guidance issued by the Food Standards Agency, primarily the Code of Practice and the Regulators' Code.

4.1.4 Openness

Enforcement officers will help businesses to understand what is expected of them

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(and what would not be expected) and what they should expect from the enforcing authorities.

Confirmation of all work (initial inspections, revisits and complaints) will be given in writing to business managers and as appropriate to head offices. Information will clearly explain what the non-compliant item or activity is, the advice being given, actions required or decisions taken and the reasons for these.

There will be a clear distinction between legal requirements and good practice recommendations (either verbally or written).

The Food Standards Agency's leaflet 'Food Law Inspections and Your Business' will be brought to the attention of Food Business Operators (or their Representatives) via the Councils' website after initial inspections and after other visits if formal action is proposed.

Where notices have been served and are on a Public Register, this will be available for viewing free of charge.

If formal requests for information are received from a third party, advice will be sought from the Data Protection Monitoring Officer or the Legal Department prior to replying.

Businesses will be made aware of the Corporate Complaints Procedure when appropriate and the appeals procedure to the Principal Environmental Health Officer in the first instance. This is to be included in correspondence to businesses following inspections.

4.1.5 Helpfulness

The principle is to actively work with businesses to advise on and assist with compliance wherever possible. To this end, officers will identify themselves by name and provide a contact point and telephone number for further dealings. Businesses will be encouraged to seek advice/information; information will be freely available on the Councils' website with links to those produced by central government. When appropriate, training courses/seminars will be provided for businesses on specific issues.

4.2 Procedures Based on HACCP Principles

Article 5 of EC Regulation 852/2004 is flexible and requires food businesses to establish procedures that control food safety hazards and integrate these with documentation and record keeping appropriate to the size and nature of the business. Whilst larger, more complex businesses and those with a high level of understanding of food safety management may choose to demonstrate compliance by having a traditional HACCP system, others may do so with simpler approaches that take account of this flexibility as long as the same outcome is achieved; safe food

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being produced.

4.2.1 Appropriateness of the Food Safety Management System (FSMS)

Although the Food Standards Agency has produced the SFBB packs to help a variety of businesses within the food industry e.g. catering, retail and childminders, it is recognised that it does have limitations and may not be the most appropriate FSMS to use. Therefore if inspectors identify that the scope of the food operation exceeds that of the SFBB toolkit, then the food business will be required to produce a fully documented food management system in accordance with HACCP principles.

In certain circumstances, in particular in food businesses where there is no preparation, manufacturing or processing of food, it may be the case that the relevant hazards can be controlled through the implementation of prerequisite requirements. For example, where a business is especially low risk, e.g. sweet shop, greengrocer, market stalls etc. presenting only basic hygiene hazards; it may be sufficient that the business has a guide to good hygiene practice and understands and applies it. In these circumstances, documentation and record keeping may not be necessary.

4.2.2 Enforcement

The Food Standards Agency has produced guidance and toolkits; Safer Food, Better Business (SFBB) for a variety of businesses and funded local authorities to deliver coaching during the initial introduction of SFBB. Therefore unless a new business, all established food businesses have been given a great deal of advice and guidance to meet their legal obligations.

This policy will secure compliance with Article 5 of EC Regulation 852/2004 through a staged approach where appropriate but otherwise, where non-compliance is established, appropriate enforcement action will be taken. This will normally take the form of Hygiene Improvement Notices but where significant risks exist, more immediate action will be taken.

Where there is a partly developed system, and controls are in place and there are no significant risks to health, a more informal approach may be more appropriate.

Some of the HACCP principles are on-going, for example monitoring, so notices can not be served. It is therefore likely that notices may only be served for the implementation or review of a documented FSMS.

4.2.3 New Premises

From time to time new businesses will be established and existing premises will change ownership. The following options should be considered:

i. New owners should be made aware of their responsibilities in respect of

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Article 5 (if possible before the premises are open for business);

- ii. Establish at the initial inspection that the business does not present a significant risk to public health. This inspection should be performed at the earliest opportunity following the local authority being notified;
- iii. Provided that no significant risk to public health exists, agree with the proprietor a programme of compliance with Article 5;
- iv. Where a significant risk to public health exists, action is to be taken in line with the general enforcement policy.

5.0 POLICY WITH RESPECT TO COMPLAINTS

5.1 Background

Complaints in respect of food either relate to:-

- i) hygiene issues and hence involve local businesses;
- ii) complaints relating to the actual food itself, either appearance, taste, contamination, (whether physical, chemical or allergenic where an imminent risk to health), or microbiological quality or;
- iii) Food Alerts issued by the Food Standards Agency in relation to national or international food safety issues.

The purpose of investigating such complaints is:

- i) to identify possible causes for and to resolve any problems which pose a risk to public health;
- ii) to substantiate complaints and to provide a service to the public;
- iii) to provide information to the food industry in order to raise and maintain standards;
- iv) to perform a duty of enforcement and;
- v) to prevent further complaints.

5.2 Food Hygiene

These types of complaint generally involve a local business, either relating to the standard of hygiene seen/experienced or a complaint following illness.

Complaints that relate to issues that may pose a risk to health are considered of utmost importance and therefore require an immediate response upon notification in order to investigate as thoroughly as possible and to ensure that food continues to be prepared safely. In cases involving issues that do not pose a risk to health, these will be investigated within the departmental response time of 3 days.

Officers will conduct their investigations and visits in accordance with previously detailed policies and guidance. Where appropriate, samples will be taken in accordance with the Sampling Policy.

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5.3 Food Complaints

These types of complaint relate to food that has been purchased or eaten within the District and does not meet certain health standards as defined by EC Regulation 178/2002. This could include issues such as mould growth, physical contamination or chemical contamination posing an imminent risk to health. Where the complaint is concerned with composition, adulteration, chemical contamination where no imminent risk to health or misleading claims (labelling), the complaint will be transferred to the Trading Standards Service at the County Council. Likewise, where the complaint originated outside Chiltern and South Bucks areas, the complaint shall be referred to the relevant local authority.

In relation to complaints associated with allergens, officers, will investigate complaints where there has been an alleged reaction by a member of the public. All other complaints relating to labelling and provision of information to consumers will be referred to Trading Standards if the business is not due an official food control intervention.

All investigations shall be performed in accordance with the FSA Code of Practice and Practice Guidance and the 'Primary Authority Scheme' shall prevail throughout the investigation.

Enforcement action will be in accordance with the Enforcement Policy.

5.4 Food Alerts

The Food Standards Agency operates a system to alert the public and local authorities of serious problems concerning food that does not meet food safety requirements, food that is inadequately labelled or food that may be allergenic. Where a problem has occurred, food is normally withdrawn on a voluntary basis. However in some cases the withdrawal of food involves the food companies working with central and local Government.

When a Food Alert is issued, local authorities are informed of the action that they should take at a local level e.g. local publicity, contact with local food businesses or just to be aware of potential problems during visits to businesses.

Officers will carry out action specified in the Food Alert as instructed and in the most appropriate, expeditious and cost effective manner possible to safeguard public health. Action will be taken in accordance with guidance issued by central government.

If, following complaints, a Food Alert needs to be issued, the guidance in the Code of Practice will be followed.

When necessary, the Consultant in Communicable Disease Control and/or Public

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Analyst will be consulted and advice sought as to the public health significance of particular issues.

6.0 POLICY WITH RESPECT TO SAMPLING

It is recognised that food sampling provides a valuable contribution to the protection of the public and the food law enforcement functions of the authority and that the food and water sampling programme is a valuable tool to assist in determining food safety standards.

6.1 Objectives

The following are the key objectives for sampling recognised by the authorities:

- To protect the consumer through the enforcement of food legislation.
- To obtain recognised and usable microbiological standards for foods, via a nationally co-ordinated sampling programme.
- To assist in the assessment of food safety and to help in the evaluation of hazard analysis (or HACCP) management systems.
- To check that foods comply with statutory microbiological standards, where available.
- To assess the microbiological quality of food manufactured, distributed or retailed in the authority's area.
- To identify specific foodstuffs that could pose a hazard to the consumer because they may contain significant levels of pathogenic bacteria.
- To facilitate the issue of an export certificate.

When sampling, officers will have regard to the Code of Practice and comply with additional guidance issued by the Food Standards Agency. Officers will also undertake appropriate training in sampling techniques.

6.2 Co-ordination

It is recognised that good co-operation and co-ordination at a national and local level is necessary to achieve some objectives and therefore the authorities are committed to:

- i) participating in and co-operating with the Food Standards Agency's national sampling schemes and EU co-ordinated control programmes.
- ii) participating in and co-operating with Public Health England national schemes.
- iii) co-ordinating with adjoining local authorities and local PHE to agree locally co-ordinated sampling.

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iv) undertaking final product and critical control point monitoring as part of the authorities' own primary authority responsibilities and to avoid duplication with other Port Health or Primary Authorities.

6.3 Sampling Programme

An annual sampling programme will be drawn up based on the objectives above to cover:

- private water supplies, locally bottled water
- PHE and FSA co-ordinated sampling
- locally co-ordinated sampling including locally manufactured products and approved premises
- identified high risk businesses
- poor performing businesses
- lower risk businesses as part of an alternative intervention strategy

The sampling programme will take account of the number, type and risk ratings of food businesses within the Chiltern and South Bucks areas, the authorities' own Primary Authority responsibilities and the need to ensure that the provisions of food law are adequately enforced.

Adequate resources will be available to fulfil the annual sampling programme. However, in the event of food poisoning outbreaks and other emergency incidences, additional resources will be made available as necessary. A reciprocal agreement has been made between the Buckinghamshire authorities to share resources in the event of an emergency.

When deciding to sample, the following should be considered:

- i) Whether further processing of the food will reduce or eliminate microorganisms prior to consumption;
- ii) The role played by hazard analysis or HACCP in the production of safe food;
- iii) The statistical confidence in the sampling technique.

All businesses will be notified at the time of sampling of the purpose of taking the sample and will be sent the results. In circumstances where results are unsatisfactory, businesses will be notified of the result and given advice and guidance to remedy the specific problem. Officers will follow up unsatisfactory results with visits and further sampling.

As part of informal monitoring, the company concerned generally will volunteer the sample to the sampling officer. However, if the company requests payment or the quantity or frequency of sampling is likely to give rise to significant financial consequences for the owner of the food, then the food will be purchased.

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If enforcement action is anticipated under Section 14 of the Act following microbiological examination, the sampling officer should purchase the sample. Otherwise, in other circumstances, powers under the Food Safety Act 1990 will be used. Enforcement action will be in accordance with the Enforcement Policy. In relation to nationally co-ordinated sampling programmes, the protocol concerning obtaining the sample will be followed.

6.4 Water

All private water supplies will be monitored and risk assessed in accordance with the Private Water Supplies Regulations.

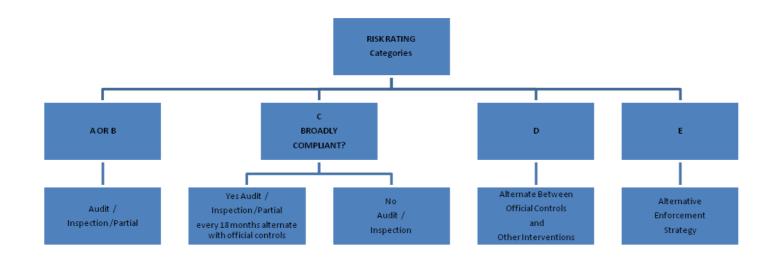
Swimming pool waters will not be routinely sampled, on the grounds that such samples are of limited snapshot value, do not necessarily fall to the authorities for enforcement purposes and should be maintained and monitored by the operator on a daily basis. However, this would not preclude the need for one-off sampling exercises particularly targeted at high risk pools such as jacuzzis' and spa pools or where incidents have been associated with a facility.

6.5 Suspect Food Poisoning

Where a food poisoning outbreak is suspected, faecal specimens will be taken together with any remaining foodstuffs, as a matter of priority and as directed by Public Health England.

Individual cases of suspect food poisoning will be referred initially to their General Practitioner unless officers feel other action is merited or requested by PHE. Foodstuffs will be sampled where evidence supports this action.

APPENDIX 1 - RISK RATING CATEGORIES AND INTERVENTIONS



NB. A broadly compliant premise is one which has a risk rating score of not more than 10 points under each of the following three parts of Annex A i.e. level of compliance relating to hygiene, structure and confidence in management. The types of intervention allowed will therefore vary depending upon the category. The following explains the types of interventions allowed for each category.

1a. Types of intervention for Category A, B & C which are not Broadly Compliant

For Categories A and B, and those category C premises that are not broadly compliant, these are considered to be the high risk premises, and therefore most of our focus will be targeted to these premises. The appropriate planned intervention should be;

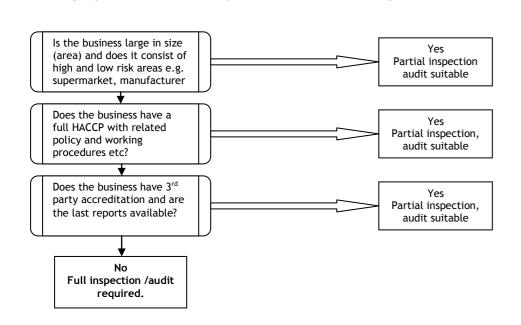
- an inspection
- a partial inspection; or
- an audit

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Other interventions such as sampling, or education and training can also take place alongside the above interventions. Sampling of high risk premises is encouraged where poor practices at a high risk food business are identified, or where they do not have confidence in the method of production of a particular foodstuff.

To decide whether to conduct an Inspection, Partial Inspection or Audit the following flow chart will be considered.

For Category A & B and Broadly Compliant C, Choosing Full or Partial inspections



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1b. Types of intervention for Category A & B which are not Broadly Compliant and have persistent non compliance

At the start of each financial year the Principal Environmental Health Officer or Senior Specialist Environmental Health Officer (Business Support) will assess those premises within those categories that have **persistent** non compliance i.e. those food businesses that have been rated at Category A or B and that have not been broadly compliant on more than two occasions. Each persistent non-compliant business will be allocated to an officer and will be inspected on the due date. Case reviews of these premises will be carried out between the inspecting officer and either the Principal Environmental Health Officer (Business Support).

1c Food Hygiene Inspections Full and Partial

During partial or other inspections the following information as a minimum will still be ascertained;

- Confirmation of the operations carried out
- Confirmation of the Products Produced
- An assessment of the effectiveness of the critical control points
- The examination of the CCP records

Partial areas officers can choose to cover; Drainage, Personal Hygiene, Sickness Policies, Ventilation, Pest Control Records, Detailed water plans, Waste Contracts, Detailed Cleaning Schedules etc

2. Types of Intervention for Premises that are Category C and Broadly Compliant

For Category C Premises that are broadly compliant; on an 18 month alternative basis, official control interventions, other than inspections, can be used for example;

- Sampling visit
- Surveillance / alternative enforcement visit
- Monitoring and Verifications visits risk based visit, focus on most critical points;

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- Cleaning
- Temperature Control (chilling, cooking, hot holding, cold displays)
- Cross contamination etc

<u>3. Types of Interventions for Category D Premises</u>

These are premises that are considered to be lower risk and therefore interventions can alternate on a 2 year alternating basis between official control interventions and non-official control interventions such as;

- Sampling visit (sampling visits will not currently be used with this type of premises unless high risk contraventions are found.)
- Surveillance / Alternative Enforcement Visit
- Monitoring and Verifications visits risk based visit, focus on most critical points;
- Cleaning

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- Temperature Control (chilling, cooking, hot holding, cold displays)
- Cross contamination etc
- Coaching Visit
- Advice, Education, Information,

However, where a business has scored 30 or 40 for 'type of food and method of handling' the official control must be an inspection, partial inspection or audit.

4. Types of interventions for Category E Premises- Alternative Enforcement Visits

Alternative food hygiene inspections are carried out in 'low risk' establishments. These are establishments which score less than 31 points overall as dictated by the Food Law Code of Practice – Food Hygiene Inspection Rating Scheme. Category E food businesses form part of the inspection programme and are monitored accordingly. The approach will be through the use of self-assessment questionnaires which are completed and returned by the food business operator and assessed by authorised officers who would also determine any necessary follow up action.

The use of an alternative enforcement strategy does not preclude the use of an official control intervention when considered necessary or appropriate

and would not be used for those businesses that are approved under Regulation 853/2004.

Premises Category	Interventions that can be undertaken
A	Inspection, Audit (Full or Partial)
В	Inspection, Audit (Full or Partial)
C (not broadly compliant)	Inspection, Audit (Full or Partial)
C (broadly compliant)	Inspection, Audit (Full or Partial) alternating (18 monthly) with Monitoring, Surveillance or Verification, Sampling
D	Inspection, Audit (Full or Partial), Monitoring, Surveillance or Verification, Sampling alternating (every 2 years) with Advice, Coaching, Information, Intelligence Gathering
E	Alternative Enforcement

The risk assessment will be reviewed at every general inspection, but not at revisits. Businesses will be encouraged to be aware of this risk assessment scheme and be encouraged to reduce their score thereby reducing the frequency of inspection. When requested, each officer will advise the food business operator/manager of their rating and be prepared to discuss how it was arrived at and how the business can reduce it.

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Appendix 2 Service Standards

Our Commitment

- We will give you verbal feedback at the end of each inspection and aim to give you written confirmation either at the time of the inspection or within 5 working days.
- We will update the FSA Food Hygiene Rating Scheme website fortnightly
- We will respond to FHRS safeguarding requests within 10 working days
- If we receive a request for service we will investigate and respond within 10 working days.
- We will answer letters within 10 working days of receiving them and if we cannot give a full reply within that time, we will let you know when you can expect one and why there is a delay.
- We will answer emails within 10 working days of receiving them.
- We will answer the telephone within 20 seconds (6 rings).
- If we cannot give you a satisfactory reply when you telephone, we will call back at an agreed time.
- We will provide you with a contact name and number.

What to do if you are unhappy with the service?

The Council has a Corporate Complaints Procedure which can be found at:

http://www.chiltern.gov.uk/complaints

http://www.southbucks.gov.uk/complaints

These pages explain how to make a complaint against any Council Service.

If you disagree with the nature of your food hygiene inspection, the FHRS outcome or wish to add a comment to your website entry, then you can use the safeguarding measures published at:

http://www.southbucks.gov.uk/fhrssafeguards

http://www.chiltern.gov.uk/fhrssafeguards

CHILTERN DISTRICT COUNCIL and SOUTH BUCKS DISTRICT COUNCIL

Environmental Health Section

HEALTH AND SAFETY ENFORCEMENT POLICY

April 2019 - 20



Health and Safety Enforcement Policy 2019-20

- 1.0 Aims and Objectives
- 2.0 Standards for health and safety related work
- 3.0 Health and Safety Interventions
- 4.0 Enforcement Policy
- 5.0 Policy with respect to Complaints
- 6.0 Policy with respect to Accident Investigation
- 7.0 Policy with Disclosure of Information

BACKGROUND

The Healthy Communities Division has a key role in ensuring that everyone who works, resides or visits Chiltern and South Bucks Districts, are protected from unsafe work practices.

The Health and Safety Executive (HSE) specifies the following elements as essential for a local authority to adequately discharge its duty as an enforcing authority:

- i. A clear published statement of enforcement policy and practice;
- ii. A system for prioritised planned inspection activity according to hazard and risk, and consistent with any advice given by the Health and Safety Executive (HSE) and Local Authority Unit (LAU);
- iii. A service plan detailing the local authority's priorities and its aims and objectives for the enforcement of health and safety;
- iv. The capacity to investigate workplace accidents and to respond to complaints by employees and others against allegations of health and safety failures;
- v. Arrangements for benchmarking performance with peer local authorities
- vi. Provision of trained and competent inspectorate;
- vii. Arrangements for liaison and co-operation in respect of the Primary Authority scheme.

This policy sets out the ways in which the Healthy Communities Division will achieve Central Government aims and objectives, and policies in relation to ensuring that standards required by the Health and Safety at Work etc Act are met, advise businesses and employees on safety issues and ensuring that preventative health measures are adopted by businesses.

Our enforcement policy reflects the Principles of Good Regulation set out in the Legislative and Regulatory Reform Act 2006, namely that regulatory activities should be carried out in a way which is transparent, accountable, proportionate and consistent; and that regulatory activities should be targeted only at cases in which action is needed.

In drafting this policy, we have taken account of the Regulator's Code and the Councils' overarching enforcement policy.

It should be noted that during the life of this policy, Chiltern and South Bucks District Councils will form part of a new Buckinghamshire Unitary Authority. Therefore, any reference to either of the district councils or the county council after 1st April 2020 should be construed as being that of the new unitary authority.

1.0 AIMS AND OBJECTIVES

1.1 Aim

It is the Councils' aim to:

- support and assist businesses to comply with legislation
- provide consistent, accurate and up-to-date information aimed at providing protection to employees and customers
- provide effective and efficient regulatory services that meets customer needs

1.2 Objectives

The Councils will aim to achieve these aims in the following ways:

To protect people by providing information, training and advice, promoting a goal-setting system of regulation and undertaking enforcement in accordance with this policy and Government guidance
Develop partnerships and approaches to service delivery to enhance services, increase impact and reduce costs through innovation;
To support businesses to adopt best practice and to recognise their contribution towards economic growth and social benefits;
Develop new ways to establish and maintain an effective health and safety culture in a changing economy, so that all employers take their responsibilities seriously, the workforce is fully involved and risks are properly managed;
Exemplify our own corporate health and safety practice in managing our resources.

1.3 Service Delivery

The service will be delivered through:

- risk-based targeting of inspections of high risk businesses based on national and local intelligence, with appropriate follow-up action;
- ii) project based intervention programmes based on the HSE's key priority areas;
- iii) investigation of complaints with appropriate follow-up action;
- iv) investigation of accidents with appropriate follow-up action;

- v) suitably trained and experienced officers who are effectively monitored;
- vi) provision of information to businesses about legal requirements, good practices and what to expect of the inspecting officer/authority;
- vii) promotional activities to inform and encourage high standards in businesses.

1.4 Priorities

It is recognised that resources are finite. Therefore it is particularly important that resources for health and safety are targeted at activities that pose the greatest risk and that will allow for the most effective and efficient use of resources in delivering outcomes.

Priority will be given to targeting those activities that pose the greatest risk to employees and members of the public. In particular, priority will be given to those issues within the HSE Strategy identified as the greatest causes of accidents within the local authority enforced sector. In setting priorities and the local authorities' work plan, due regard will be given to the National Local Authority Enforcement Code published by the HSE. This will consist of having regard to national priorities and sector specific strategies set by the HSE; local priorities informed by local intelligence, workplace accidents and complaints, Matters of Evident Concern and Matters of Potential Major Concern and Primary Authority inspection plans.

These key priorities will determine the approach taken towards individual inspections and the overall intervention programme itself. Officers will focus on these key priorities during interventions in the following way:

- the correct and uniform identification of high-risk areas with particular attention being given to the key priorities during inspections and as a result of complaint and accident investigation and to concentrate efforts to reduce these risks;
- ensuring compliance with the law and;
- engaging in those promotional activities for businesses and employees, which are most likely to foster improved health and safety;
- working with other agencies to improve health and safety standards either through enforcement or promotional activities.

2.0 STANDARDS FOR HEALTH AND SAFETY RELATED WORK

2.1 Authorisations

The Councils will set standards for the qualifications, experience and competence of its officers.

In the context of the Health and Safety at Work Act 1974, an authorised officer's powers include the inspection of premises, the examination, sampling and seizure of substances, articles and equipment, the service of notices and taking emergency action. Authorised officers will be authorised in accordance with Section 18 guidance issued by the HSE.

Under the Chiltern District Council and South Bucks District Council Constitutions the Head of Healthy Communities has delegated authority to exercise the Councils' functions, powers and

duties in relation to health and safety at work.

The Director of Services and Head of Healthy Communities in exercising his/her authority to appoint authorised officers will apply the standards contained in this Policy.

2.1.1 Inspections

Inspection of premises will only be undertaken by officers who are suitably qualified, experienced and competent in accordance with the requirements of Section 18 Guidance. This will equally apply to those employed on a contract basis.

Newly appointed officers or currently employed officers who are extending their duties will not be authorised unless they possess the appropriate competencies, skills, qualifications and experience to undertake their duties and that they have undergone a period of structured training in accordance with Section 18 Guidance. The assessment of competency etc. will be undertaken by the Senior Specialist Environmental Health Officer (Business Support) or the Principal Environmental Health Officer.

2.1.2 Enforcement Notices

Service of Improvement Notices will only be undertaken by qualified officers with experience in health and safety law enforcement, and after consultation with the Senior Specialist Environmental Health Officer (Business Support) or Principal Environmental Health Officer.

The service of notices by hand will be by any person who is capable of explaining the meaning and legal status of the notice. Notices served by other methods will be in accordance with current legal guidance.

Officers will be authorised to serve Prohibition Notices in accordance with the standards within the Policy. Where practicable, he/she will be accompanied by another authorised EHO to corroborate the proceedings and consult with the Senior Specialist Environmental Health Officer (Business Support) or Principal Environmental Health Officer. If this is not possible, then the Environmental Health Manager is to be notified as soon as possible after service.

2.1.3 Seizure and Detention

Officers will be authorised to inspect, detain and seize articles and equipment subject to experience and competence.

All officers will be assessed for the necessary practical skills, experience and competency by the Senior Specialist Environmental Health Officer (Business Support) or Principal Environmental Health Officer.

2.1.4 Competency

The Principal Environmental Health Officer has been given specific responsibility for health and safety matters and managing the health and safety service. This will be in accordance with the documented 'Inspection Monitoring Management System'.

Environmental Health Officers and Technical Officers will carry out inspections and exercise their powers in accordance with the Health and Safety at Work etc. Act, associated Regulations and Codes of Practice and within the restrictions of their authorisation.

The Senior Specialist Environmental Health Officer (Business Support), (or in his/her absence, the Principal Environmental Health Officer) will be responsible for the supervision and training of officers and for the maintenance of auditable records. A training and development plan will be used to establish current qualifications and competencies and to identify future training needs in order that officers can effectively carry out their duties.

Recommendations will be made by the Principal Environmental Health Officer to the Head of Healthy Communities in respect of the powers to be given to officers and the nature of premises to be inspected.

A list of the officers, their powers and the nature of premises which the officer may inspect, will be maintained and regularly updated together with records of training.

2.1.5 Authorisation of Persons with Expert Knowledge.

Under Section 20(2)(c)(i) of the Health and Safety at Work etc. Act 1974 an authorised officer may take another person with them on the inspection e.g. a person with an expert knowledge of the type of activity being inspected. Authorisation of such persons is necessary to ensure the right of entry to the premises concerned. Where it is necessary to be accompanied by another person, an officer will ensure they are duly authorised in writing and empowered under Section 19 to perform such activities as are necessary under Section 20 of the Act. Such authorisation is given under the authority of the Head of Healthy Communities.

2.2 Guidance

The authorities will have regard to Codes of Practice and guidance issued by the Health and Safety Executive, other advice issued by the Government and advice issued by Health and Safety Executive/Local Authority Enforcement Liaison Committee (HELA).

2.3 Uniformity

The Authorities acknowledge the need to act in a consistent and uniform manner and advocates a common-sense approach to the selection of enforcement action and activities.

The following areas are all considered important in achieving uniformity. These are detailed in the 'Inspection Monitoring Management System':

- i) the awareness, adherence to and review of the health and safety policy document and further development of office procedures;
- ii) training, qualifications, supervision of staff. Regular practical training and update sessions will be essential to ensure uniformity;
- iii) cross monitoring visits of staff and monitoring of letters, inspection records and notices by senior officers;
- iv) use of the Primary Authority Partnership Scheme, specified in HELA Guidance and by the Office of Product Safety and Standards;

- v) liaison with local health and safety groups/adjoining authorities. Use of joint training initiatives. Co-operation and joint working on uniformity issues;
- vi) compliance with relevant Codes of Practice and guidance from LAU;
- vii) Consistent application of the Enforcement Management Model (EMM) when making enforcement decisions.

2.4 Advice to Businesses

The authorities are committed to ensuring that businesses are aware of their legal obligations and to supporting businesses in achieving best practice by providing information and guidance to assist businesses. In particular, it is recognised that small businesses do not have access to specialist health and safety knowledge or information and so initiatives will be developed to target information for these businesses within the districts. The authorities will be committed to helping small businesses.

Where opportunities arise to provide advice and guidance to businesses over and above that required to ensure legal compliance, then a charge may be made.

In particular:

- i) the Councils' websites will be the primary source of information to assist businesses with interpretation of legislation or good practice. The Councils also provide services for ethnic minority groups through 'Language Line', translation services and courses in languages other than English. Where the Councils do not provide the service itself, information will be given to businesses about other providers.
- ii) a chargeable advice service may be available to new and existing businesses to support them in achieving high standards of safety and compliance.
- iii) businesses will be supported and encouraged to participate in the Primary Authority Partnership Scheme where applicable.
- iv) where there is sufficient demand occasional talks will be given to businesses. Charges to cover costs will be made for out of hour's sessions.

2.5 Advice to Members of the Public

The Councils' websites will be the primary source of advice and information on safety issues and will be reviewed on a quarterly basis. The authorities will participate in national health and safety activities and local events. Talks to voluntary organisations and groups will be given free of charge where resources permit.

2.6 Conduct

Inspecting officers will at all times act and dress in a professional manner. Protective clothing will be worn that is appropriate to the premises being inspected and equipment will be maintained and calibrated where appropriate.

Officers will not act in such a way as to pose a risk to safety or health either to themselves, employers and employees and members of the public.

2.7 Information Sharing

Where the legislation permits, the authority will share information via agreed secure mechanisms with other regulatory agencies and local authorities about businesses to help target resources and activities and to minimise duplication.

The authorities will share information about businesses with the Primary Authority as appropriate and with other authorities when acting as a Primary Authority.

The authorities will, where feasible, follow the principle of 'collect once, use many times' when requesting information from businesses.

3.0 HEALTH AND SAFETY INTERVENTIONS

3.1 Premises

Efforts will be made to keep an up to date record maintained on a computer database of all known premises. As necessary, businesses will be assessed for the need to be included within an intervention programme based on information obtained from the proprietor or following inspection.

3.2 Frequency of inspections

The National Local Authority Enforcement Code and HELA guidance note LAC 67/2 'Setting Local Authority Priorities and Targeting Interventions' provide advice as to the prioritisation of inspections. Proactive inspection will be used only for the activities identified within the HSE's published list of higher risk activities or where there is local intelligence that risks are not being effectively managed. It is recognised that 'inspection' may not necessarily be the most effective means of dealing with a particular situation and that other types of interventions may be more suitable. The current guidance is that 'there should be no inspection without a reason'.

Risk ratings alone will not be used to determine the use of a particular intervention or to decide an intervention frequency. However, whilst it is likely that premises rated Category A have been rated such because they have been judged as not managing their risks effectively, sufficient evidence will be required to justify the risk rating; confidence in management considered in isolation is not sufficient to justify an A rating.

In recognition of the HSC/HELA Strategy priorities, inspections will be programmed on a project based basis. Each project will be identified in relation to the impact it will have in addressing the key priorities and will either be a cross-cutting project targeting a single priority e.g. slips and trips across a wide range of businesses or will be sector specific targeted at those activities that have been identified has being high risk e.g. warehousing, or those sectors where inspections will address a number of the key priorities at the same time e.g. residential care homes.

This project based approach will provide for a more efficient use of resources and be more effective in targeting the priorities that have been identified as giving rise to the highest

number of accidents. Statistical data, both nationally and locally, will be used to identify those activities which require the most attention.

Category B1, B2 and C premises will not form part of the inspection programme and so will not be subject to any proactive interventions unless they come within one of the priority subject areas.

Revisits to check on outstanding issues will be made where necessary. Where health and safety interventions coincide with food hygiene inspections, a joint inspection will be undertaken. All visits will be recorded on the computer-based system and documents scanned to the corporate Electronic Document Management System.

3.3 Inspection Procedure

3.3.1 Approach

The authorities will work to standards set within HELA Guidance and internal inspections procedure documents.

The main purpose of inspections is to identify potential risks to employee's and the public's safety or health and to ensure that the business understands the risks and has put the necessary measures in place to minimise them. When undertaking an inspection, officers will pay particular emphasis to risk assessment based management systems and the HSE key priorities.

A systematic approach to risk assessment will be adopted. Where businesses have identified their significant risks and have introduced controls, the inspection will focus on the accuracy of the assessment and on the effectiveness of the controls. Written assessments will normally be expected in high risk or complex businesses and where they employ 5 or more employees. Businesses with less than 5 employees will not be expected to have written assessments.

Where no assessment by the business can be demonstrated the inspection will focus on the officer's own assessment and examination of controls.

The whole of a premise may not necessarily be inspected at each inspection; those areas of greatest risk will be given priority. Officers will have regard to the key priorities and the focus will be on those which are significantly pertinent to the activities of the business being inspected.

Computer records will be updated following every visit.

3.3.2 Communication

Every inspection (including those where no defects are identified) will result in a written report to the employer. Copies of the report will be sent to the Manager or other relevant persons, including employee and safety representatives.

A standard format will be used. The report will cover the important issues noted during the inspection in priority order and will clearly distinguish between legal requirements and

recommendations. It will give details of the person carrying out the inspection, date, time, the areas inspected and the procedure if the proprietor disagrees with the issues raised in the report.

Good communication between inspector and employer is essential wherever possible, including ensuring that the purpose and scope of an inspection is understood and the "works" needed following the inspection with an agreed time limit. The impact of the advice should be considered so that it does not impose unnecessary burdens upon businesses.

The role of Safety Representatives in preventing injuries and ill health at work and promoting good standards of health and safety in the workplace is recognised. Therefore their role will be promoted and officers will effectively consult and communicate with them where appropriate.

Section 28(8) of the Health and Safety at Work etc. Act places a duty on inspectors to provide factual information where it is necessary to do so for the purposes of assisting in keeping employees or their representatives informed about matters that affect their health and safety. This factual information will also be provided to employers. This will include correspondence, enforcement notices, results of sampling and monitoring and intentions to prosecute.

3.3.3 Timing of Inspections

Programmed inspections will be carried out at all reasonable hours. It is recognised that some businesses operate outside normal office hours of work and so the timing of interventions will take this into account. Interventions may be by appointment to facilitate better communication with the most appropriate person at the business. However, when circumstances dictate the use of contract staff, appointments may not be possible. Notice will not be given where poor standards are likely to be found, the nature of the project work dictates an alternative approach or where complaints or accidents are being investigated.

Revisit dates may be notified in advance as an aid to ensuring that works are completed and to facilitate further discussions with the employer. Appointments may also be made when there is a need to discuss specific issues.

Where alternative dates for visits are requested by a business the inspector may agree, if suitable justification is given, and the inspector is satisfied that the purpose behind the request is not to conceal a major risk. Where the officer suspects that the intention is to hide a serious offence he/she should agree to have a quick look around and then agree a full visit at a later date.

3.3.4 Revisits

Revisit inspections will be arranged to check on matters raised in an inspection (and any obvious extra defects) where there are **significant** contraventions and/or serious risks to public health and to check on compliance with statutory notices. They will not turn into a further full inspection except where a major risk is identified. Where significant breaches of regulations have been identified, the revisit should whenever practicable be undertaken by the same officer who undertook the initial visit particularly where formal notices have been served. After initial inspections, employers must be made aware that a revisit will be made and

appropriate dates discussed.

Revisits will not always result in a written report (unless further work is required) to the employer although the employer will always be advised of the outcome verbally, and in writing if requested. However, detailed records of revisits will be made and kept on the property database. Clear records will be maintained of formal and informal notices which have been complied with.

4.0 ENFORCEMENT POLICY

This section sets out the policy relating to the general principles of enforcement in relation to health and safety and is drafted in accordance with the overarching Corporate Enforcement Policy. It details the general principles of enforcement and embraces those set out in the 'Regulators' Code' issued by the Better Regulation Delivery Office (now the Office for Product Safety and Standards) and Section 18 Guidance issued by the HSC.

More specific procedures concerned with statutory notices, emergency action, formal cautions and prosecutions are detailed in enforcement procedures. These procedures take account of all Codes of Practice and guidance issued by HSE and 'The Code for Crown Prosecutors'.

Enforcement officers by necessity as professional officers have considerable discretion in decision making and initiating enforcement action. Such action can range from informal advice, information and support through to formal enforcement mechanisms, including the use of statutory notices and prosecution.

This part applies to all dealings, formal and informal, between officers and businesses – all of which contribute to securing compliance with the law. It will provide policy standards, aid professional judgements and decision making and ensure both consistent and effective enforcement.

4.1 Principles of Enforcement

The core expectation for those we deal with, quite reasonably, is for us to be professional, fair, co-operative and consistent in our approaches. Businesses and the public also expect local authority actions to result in the remedying of potentially risky situations and for those guilty of serious offences to be adequately punished.

We will adopt a positive and proactive approach towards ensuring compliance by:

- helping and encouraging businesses to understand and meet regulatory requirements more easily; without imposing unnecessary additional cost;
- assess whether other social, environmental and economic outcomes can be achieved by less burdensome measures, and
- responding proportionately to regulatory breaches.

Enforcement should be informed by the principles of **proportionality** in applying the lawand securing compliance; **consistency** of approach; **targeting** of enforcement action, **openness** about how we operate and what businesses may expect and **helpfulness** in providing advice and assisting with compliance.

Appendix 1 sets out the standards of service you should expect to receive.

It will be expected that enforcement officers, when making decisions and communicating with businesses will follow these principles, together with relevant codes of practice and guidance. The Primary Authority partnership scheme will be used where applicable.

When considering formal action, officers will perform an assessment in accordance with the Health and Safety Executive's Enforcement Management Model (EMM). Where the proposed enforcement action deviates from the EMM, a management review will be undertaken by the Principal Environmental Health Officer.

Any departure from this must only occur when the following criteria are complied with:

- i) in exceptional circumstances;
- ii) where actions are capable of justification;
- iii) where there has been full consultation with the Principal Environmental Health Officer or Environmental Health Manager

In circumstances when officers become aware that they are considering measures which may be inconsistent with those adopted by other local authorities, formal action may be delayed to allow the matter to be discussed at the local liaison group. Reference will also be made to the Primary Authority where appropriate. However this would not be applicable in cases where there is a serious risk to public health.

Any sanctions or penalties considered should:

- aim to change the behaviour of the offender;
- aim to eliminate any financial gain or benefit from non-compliance;
- be responsive and appropriate for the particular offender and regulatory issue
- be proportionate to the nature of the offence and the harm caused;
- aim to restore the harm caused by regulatory non-compliance, where appropriate; and
- aim to deter future non-compliance

This policy will be reviewed periodically in response to new legislation and guidance issued by central government and HELA.

4.1.1 Proportionality

All enforcement actions and advice must be proportional to the risks posed to the public/employees and the seriousness of any breach of legislation. When considering enforcement action, consideration should be given to the cost of measures required to reduce the risk weighed against the benefit to be gained by reducing the risk.

In addition, there should be a staged approach to enforcement action with increasing degrees of enforcement as management of businesses fail to respond to previous requests. Officers should provide an opportunity for dialogue in relation to the advice, requirements and decisions.

The only exceptions to the above approach would be where a serious and/or imminent risk to

safety or health exists.

The staged approach to enforcement is further detailed in the enforcement procedures.

4.1.2 Consistency

Consistency of approach does not mean uniformity. It means taking a similar approach in similar circumstances to achieve similar ends.

Businesses expect consistency from enforcing authorities in advice given, the use of statutory notices, decisions on prosecution and responses to complaints.

It is recognised however, that in practice it is not simple, due to the wide range of variables faced. Therefore it is expected that officers will use their professional judgement and exercise discretion, in conjunction with this policy, when coming to a decision on appropriate action.

The following arrangements will be in place in order to promote consistency of approach:

- i) Officers will perform validation exercises relating to joint inspections;
- ii) The Senior Specialist Environmental Health Officer (Business Support) will accompany officers to assess the consistency of approach between officers;
- Officers openly discuss cases at team meetings and/or with the Principal Environmental Health Officer or Senior Specialist Environmental Health Officer (Business Support) to provide a consensus of opinion;
- iv) All formal action will be 'signed off' by the Principal Environmental Health Officer
 - v) Correspondence, file records and enforcement notices will be checked and monitored on a regular basis;
 - vi) Where inconsistencies arise, appropriate training/coaching will be given by the Senior Specialist Environmental Health Officer (Business Support);
 - vii) Where there is a need for clarification, approaches will be made to the Bucks Health and Safety Liaison Group;
- viii) Officers will participate in inter-authority consistency exercises and change working practices, if necessary, to achieve consistency;
- ix) Chiltern and South Bucks District Councils will take an active role in the Bucks Health and Safety Liaison Group;
- x) Reference will be made to appropriate central government guidance;
- xi) Reference will be made to appropriate guidance issued by a Primary Authority.

4.1.3 Targeting

Inspections and enforcement action will be targeted primarily at those activities giving rise to the most serious risks or where hazards are least controlled and that action is focussed on those responsible for the risk and who are best placed to control it.

The prioritisation of inspections will be based on guidance issued by the HSE and informed by the HSE Strategy.

4.1.4 Openness

Enforcement officers will help businesses to understand what is expected of them (and what would not be expected) and what they should expect from the enforcing authorities.

Confirmation of all work (initial inspections, revisits and complaints) will be given in writing to business managers and as appropriate to head offices. Information will clearly explain what the non-compliant item or activity is, the advice being given, actions required or decisions taken and the reasons for these.

There will be a clear distinction between legal requirements and good practice recommendations (either verbally or written).

Where notices have been served and are on a Public Register, this will be available for viewing free of charge.

If formal requests for information are received from a third party, advice will be sought from the Data Protection Monitoring Officer or the Legal Department prior to replying.

Businesses will be made aware of how to access copies of procedures, the Corporate Complaints Procedure when appropriate, the informal appeals procedure to the Principal Environmental Health Officer in the first instance and any statutory appeals procedure against enforcement. This is to be included in correspondence to businesses following inspections.

4.1.5 Helpfulness

The principle is to actively work with businesses to advise on and assist with compliance wherever possible. To this end, officers will identify themselves by name and provide a contact point and telephone number for further dealings. Businesses will be encouraged to seek advice/information; information will be freely available on the Councils' website with links to those produced by central government. When appropriate, training courses/seminars will be proved for businesses on specific issues.

4.2 Prosecution of Individuals

Subject to the general provisions of this Enforcement Policy, recommendations for prosecutions of individuals will be made if warranted. The role played by individual directors, managers and other employees will be taken into account when an investigation reveals that the offence was committed with their consent or connivance or was attributable to neglect on their part.

4.3 Death at Work

Any authorised officer called upon to investigate a fatality should ensure that early contact with the bereaved family is made and/or arrangements made to meet the bereaved as soon as they wish in order to explain the local authorities" roles and responsibilities and to provide them with relevant information. The Principal Environmental Health Officer will normally take responsibility for conducting the meeting with the bereaved family and act as the Family

Liaison Officer, supported if necessary, by another officer but not necessarily the investigating officer. This should take place as soon as possible, bearing in mind the convenience and wishes of the family. Officers should also keep relatives informed of the progress and outcome of the investigation. The policy on the disclosure of information to bereaved relatives will be in accordance with HELA LAC 45/19 'Contact With, and Disclosure of Information to, the Relatives of People Killed Through Work Activities'.

Where there has been a breach of the law leading to a work related death, consideration will be given whether the circumstances of the case might justify a charge of manslaughter. To this end, the investigating officer will liaise with the Police, Coroner and the Crown Prosecution Service (CPS) in accordance with 'Work-Related Deaths – A Protocol for Liaison'. If they find evidence suggesting manslaughter, this will be passed to the Police or where appropriate, the CPS. If the Police or CPS decides not to pursue a manslaughter case, the local authority should consider prosecution under health and safety legislation.

5.0 POLICY WITH RESPECT TO COMPLAINTS

5.1 Background

Requests for service in respect of health and safety relate to:

- i) complaints received from employees or safety representatives concerning workplace issues;
- ii) complaints received from members of the public or visitors to businesses concerning the impact of a business' activity on others;
- iii) requests for advice and information.

The purpose of investigating complaints is:

- i) to identify possible causes for and to resolve any problems which pose a risk to health and safety;
- ii) to substantiate complaints and to provide a service to the public;
- iii) to provide information to the industry in order to raise and maintain standards;
- iv) to perform a duty of enforcement and;
- v) to prevent further complaints.

Complaints that relate to issues that may pose a serious and/or imminent risk to health and/or safety are considered of utmost importance and therefore require an immediate response upon notification in order to investigate as thoroughly as possible. In cases involving issues that do not pose a serious and/or imminent risk to health and/or safety, these will be investigated within the departmental response time of 3 working days. Officers will conduct their investigations and visits in accordance with previously detailed policies and guidance.

All investigations shall be performed in accordance with HELA guidance and Codes of Practice and the Primary Authority principles shall prevail throughout the investigation.

Where it is determined that the HSE is the responsible enforcing authority, then appropriate liaison and transfer of the complaint will take place.

Enforcement action will be in accordance with the Enforcement Policy.

6.0 POLICY WITH RESPECT TO ACCIDENT INVESTIGATION

Local authorities are under a duty to investigate accidents that are notified to them under the Reporting of Injuries, Diseases and Dangerous Occurrences Regulations 2013.

The purposes of investigating an accident are:

- i) to identify the cause of the accident, to make the situation safe and to prevent further accidents occurring;
- ii) to identify whether there have been any breaches of legislation;
- iii) to provide information to the industry in order to raise and maintain standards;
- iv) to inform local and national statistics and hence the planned inspection priorities.

6.1 Decision to Investigate

All accidents which occur at premises enforced by the local authority and involve one or more of the following shall be investigated by an authorised officer:

- i) The accident results in a fatality, except when the circumstances indicate that an investigation is inappropriate i.e. death from natural causes unrelated to a work activity;
- ii) The accident results in a serious injury or a case of ill health or a dangerous occurrence;
- iii) The accident results in a serious injury or a case of ill health to a member of the public except accidents when it is clearly unrelated to a work activity;
- iv) There is a degree of public concern. This will often be linked to an actual or perceived risk of injury or ill health;
- v) The accident is related to local special surveys or campaigns or to the HSE key priority areas;
- vi) A complaint has been made regarding an accident that has occurred;
- vii) A serious breach of the law is involved;
- viii) An accident is a recurrence or is likely to recur;
- ix) A young person or child is involved (under the age of 18);
- x) The accident indicates a more general management failure.

The initial decision whether to investigate an accident or not and how far to carry that investigation will depend upon a number of factors. The following will be taken into consideration when deciding to investigate:

- i) severity and nature of the accident;
- ii) seriousness of the breach;
- iii) track record of the duty holder;
- iv) the relevance of event to a wider range of premises;
- v) practicality of achieving a satisfactory outcome;
- vi) legal considerations;
- vii) resource constraints.

In addition to informing the decision for the initial investigation, these factors will also determine the approach to be adopted and the extent of the investigation itself. This approach will ensure that resources are effectively targeted at the most serious accidents and which will result in the greatest effect on improving standards of health and safety.

7.0 POLICY WITH DISCLOSURE OF HEALTH AND SAFETY INFORMATION

7.1 Introduction

The purpose of this policy is to describe practices in dealing with the disclosure of information under legislation and good practice note `Open Government: a Good Practice Note on Access to Local Authority Information'. The policy is intended to ensure consistency with the policy and practices of the Health and Safety Executive (HSE).

The good practice note requires local authorities to draw up and follow their own policy statements. This policy document seeks to fulfil that aim. It does not seek to replace any statutory requirements on disclosure where the law requires the local authority either to withhold or to disclose. Local authorities and the HSE must follow the same legislation on disclosure of health and safety information namely:

- i) Section 28 of the Health and Safety at Work etc Act 1974;
- ii) Environmental Information Regulations 2004;
- iii) Environment and Safety Information Act 1988;
- iv) Freedom of Information Act 2000.

This policy is fully retrospective, i.e. it applies to information acquired by both Chiltern District Council and South Bucks District Council before it came into effect.

7.2 Freedom of Information Act 2000

On 1 January 2005 the Freedom of Information Act 2000 (FOI Act) created two important rights of access for any person making a request for information to a public authority:

- To be informed by the public authority whether it holds the **information** of the description specified in the request; and
- If that is the case, to have the **information** communicated to them.

The Councils have published a Freedom of Information Act Publication Scheme that will be followed should requests for information be made. These will be registered and responses monitored by the Councils' Data Protection Officer.

7.3 Section 28 of the Health and Safety at Work etc Act 1974

Section 28 of the Health and Safety at Work Act has been amended to bring restrictions on giving information into line with FOI Act.

HSWA Section 28 deals with how we manage information that we have obtained using statutory powers. Until 1 January 2005, there were only limited circumstances in which this information could be disclosed.

The Section 28 restrictions have now been removed and requests for this type of information can now be considered under the FOI Act.

Subject to the exemptions in the FOI Act (or EIR exemptions), the local authority can release information:

- proactively because it is in the public interest for us to put that information into the public domain, or
- in response to a request under the FOI Act or the Environmental Information Regulations 2004

The local authority is not required to disclose information when the public interest for making the information available is outweighed by a greater public interest in protecting it. However, applying the public interest requires us to exercise our skill and judgement and document our reasoning and decision making.

7.4 Environmental Information Regulations 2004

Chiltern District Council and South Bucks District Council recognise that these Regulations impose responsibilities in respect of the environment, environmental information held and the release of such information, subject to exempted classes of information.

Chiltern District Council and South Bucks District Council further recognise that the Regulations disapply all other statutory provisions on disclosure where those other provisions conflict with the Regulations. Section 28 in accordance with this will not normally apply to requests made for environmental information as defined in the Regulations.

For the purposes of the policy, environmental information is regarded as information relating to:

- i) the state of any water, air, flora, fauna, soil, natural site or other land;
- ii) any activities or measures (including activities that give rise to noise or other nuisance) which adversely affect or are likely to adversely affect anything in i);
- iii) any activities or other measure (including environmental management programmes) which are designed to protect anything in i).

This policy will not require the release of information about human health and safety except where human health and safety have been, or could be, affected through environmental media (e.g. air, water or soil). For example, information that workers were directly harmed in the manufacture of a substance is not releasable under the Regulations as environmental media are not involved. However, if fish were harmed, or could have been harmed, because a substance got into the food chain, such information would have to be released on request as environmental media are involved.

Local Authorities are within scope of the Regulations as they have environmental responsibilities and hold environmental information. The local authority may obtain environmental information in carrying out any of its functions or in any area of their responsibilities and such information is subject to the requirements of the Regulations. For

example, information could be obtained on noise, Legionnaires' disease, ionising or nonionising radiations and may be disclosable to the extent that it relates to the environment.

7.5 Environment and Safety Information Act 1988

In order to comply with the provisions of the Act Chiltern District Council and South Bucks District Council will maintain public registers of information on improvement or prohibition notices having public safety or environmental implications.

The register entries will include brief details of the breach of legislation and action required and will consist of the first page of the notices.

No charge will be raised for the inspection of the register.

- 7.6 Enforcement Notices, Inspection Reports and Convictions
- 7.6.1 Enforcement Notices

Information on only some notices is on the public registers kept under the Environment and Safety Information Act 1988. Under this policy Chiltern and South Bucks District Councils will also provide enquirers with information on any other health and safety notice it has served. The information provided will include the name and address of the premises, the date of the notice, the statutory breach and the date by which the breach must be remedied.

7.6.2 Inspection Reports

Requests for inspection reports will be considered in accordance with the Councils' FOI Publication Scheme and the Environmental Information Regulations 2004.

7.6.3 Convictions

Chiltern District Council and South Bucks District Council may hold on public registers the names and addresses of firms/individuals convicted of breaches of health and safety legislation.

Appendix 1. Service Standards

Our Commitment

- We will give you verbal feedback at the end of each inspection and aim to give you written confirmation either at the time of the inspection or within 5 working days.
- If we receive a request for service we will investigate and respond within 10 working days.
- We will answer letters within 10 working days of receiving them and if we cannot give a full reply within that time, we will let you know when you can expect one and why there is a delay.
- We will answer emails within 10 working days of receiving them.
- We will answer the telephone within 20 seconds (6 rings).
- If we cannot give you a satisfactory reply when you telephone, we will call back at an agreed time.
- We will provide you with a contact name and number.

What to do if you are unhappy with the service?

The Council has a Corporate Complaints Procedure which can be found at:

http://www.chiltern.gov.uk/complaints http://www.southbucks.gov.uk/complaints

These pages explain how to make a complaint against any Council Service.

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Cabinet

Full Council	19 November 2019	
SUBJECT	Report on Special Urgency	
RELEVANT MEMBER	Councillor N Naylor, Leader of the Council	
RESPONSIBLE OFFICER	Steve Bambrick, Acting Chief Executive	
REPORT AUTHOR	Mathew Bloxham, Democratic & Electoral Services Manager;	
	Mathew.bloxham@chilternandsouthbucks.gov.uk	
WARD/S AFFECTED	Not Ward Specific	

1. Purpose of Report

To report to Cabinet and Full Council the urgent implementation of a decision taken on 25 September 2019 by the Portfolio Holder for Resources on an Inter Authority Agreement for Buckinghamshire County Council Legal Services, as required by Section 4.2 of the Council's Overview and Scrutiny Procedure Rules.

RECOMMENDATION:

That Cabinet and Full Council note the report.

2. Reasons for Recommendations

As set out in section 4.2 of the Council's Overview and Scrutiny Procedure Rules, decisions implemented as a matter of urgency must be reported to the next available meeting of the Cabinet and Council, together with the reasons for urgency.

3. Content of Report

Details of the decisions and reasons for urgency are included below. A notice has been published on the Council's website.

Decision:

Having considered the advice of the PAG, the Portfolio Holder RESOLVED that South Bucks District Council enter into an Inter Authority Agreement with Chiltern District Council and Wycombe District Council, for the provision of legal services to Buckinghamshire County Council, from 1 October 2019 to 31 March 2020. The Head of Legal & Democratic Services be authorised to agree the final terms and conditions of the IAA.

Reasons for Urgency: Under Rule 4.2 of the Council's Overview and Scrutiny Procedure Rules the Chairman of Overview and Scrutiny Committee agreed to the urgent implementation of the Portfolio Holder's decision without the call-in procedure applying because implementation was required from 1 October 2019 which was before the call in period was due to end. Implementation was required from 1 October 2019 because Buckinghamshire County Council's external legal services contract with HB Public Law was terminated on 30 September 2019.

Cabinet	09
Full Council	19

4. Consultation

In accordance with the Council's Overview and Scrutiny Procedure Rules, as detailed above, the Chairman of the Services Overview Committee was consulted prior to the decisions being dealt with as a matter of urgency.

5. Corporate Implications

Financial: None arising from this report, the report which went to the Resources PAG meeting on 24 September 2019 can be viewed on the Council's website.

Legal: This report has been provided in accordance with the Council's Overview and Scrutiny Procedure Rules which require decisions taken as a matter of urgency to be reported to the next available meeting of the Council, together with the reasons for urgency.

Background	Report which went to Resources PAG meeting on 24 September
Papers:	2019