

## AUDIT REPORT

Audit of Official Controls in  
Bottled Water  
Establishments

Environmental Health  
Service of the Health  
Service Executive.

**CORRECTIVE ACTION PLAN**

September 2023



## CORRECTIVE ACTION PLAN

This Corrective Action Plan describes audit findings requiring corrective action, documents responsibility for addressing the findings, and describes progress on the closeout of actions.

**Audit:** Audit of official controls in bottled water establishments

**Official agency:** HSE

**Date of audit:** June 2022

**CORRECTIVE ACTION PLAN**

|   | To be completed by the FSAI |   | To be completed by the agency   |                          | To be completed by the agency and the FSAI through service contract liaison process |        |                                  |
|---|-----------------------------|---|---|--------------------------|---|--------|----------------------------------|
|   | Report reference number     | Finding requiring corrective action   | Proposed corrective action  | Proposed completion date | Update  | Status |                                  |
|   |                             |   |   |                          |   | Open   | Closed (include date closed out) |
| 1 | Audit findings              | <p>Ensure all service contract requirements are adhered to,</p> <p>The specific data to be provided to the Authority includes that specified in Schedule 4, Section 1.1 (X), which states “the annual work plans as they relate to this Service Contract which will be agreed with the Authority for each calendar year to which a plan applies”. The documented plan to meet this requirement for 2021 had not been electronically transmitted to the Authority during that calendar year.</p> | <p>The plan was sent to the FSAI in June 2022.</p> <p>The 2022 and 2023 Plans have been sent to the FSAI during the related years. It has been agreed with the FSAI that from 2024 the Work Plan will be sent to the FSAI by the 31<sup>st</sup> of March annually presuming that the HSE National Service Plan has been signed off by that date.</p> | Closed May 2023          | .   |        | Closed – May 2023                |

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| 2 | Audit findings              | <p>Ensure documented procedures developed by the EHS are adhered to,</p> <p>I. Section 6.4.1 of Protocol 52 states that “On an annual basis, the PEHO completes the Local Learning &amp; Development Plan/Tracker”. In one local area office visited, completion of the local learning and development tracker could not be demonstrated to the audit team for 2021 and for the relevant period of 2022.</p> | <p>As stated in the audit report, the record was completed in Quarter 4, 2022.</p>   | <p>Closed - December 2022.</p> |   |        | <p>Closed - December 2022.</p>   |
|   |                             | <p>II. Section 6.9 of EHS protocol 3, states that “Where there is a deviation from the standard inspection frequency the PEHO must be informed and the reason and date for same must be recorded”. Evidence of this was not provided to the audit team at the time of the audit.</p>   | <p>Section 6.9 of Protocol 3 relates to the relevant requirement in Guidance Note 1 where there is a decision made to deviate from the standard frequency to take account of the requirements of Article 3 (b) (c) and (d) of Regulation (EC) No 882/2004 once an inspection history is established. It does not apply to where targets were not achieved.</p> <p>The words “as per Section 2.3.4 of Guidance Note 1” has been added to Section 6.9 of Protocol 3.</p> | <p>Closed - August 2023</p>    |   |        | <p>Closed – August 2023</p>      |

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|                             |   |   |  |   | Open   | Closed (include date closed out)                             |
|                             | <p>III. Section 6.5 of Protocol 51 states “To ensure document control on all related forms and letters, a revision number and issue date will be applied”. The audit team noted that there was no revision number present on the following four forms, FR2 FIC Other Waters, FR2 FIC Natural Mineral Waters, FR2 FIC Spring Waters and FR3 852 visit record.</p> <p>In relation to the management of document control on forms / records, the EHS informed the audit team that the name of the form / record is a unique identifier. It has not been documented in Protocol 51 that the name of the form / record is a unique identifier.</p> | Revision number and issue dated applied.  | <p>Closed - December 2022 (FR2).</p> <p>Closed - January 2023 (FR3).</p> |   |        | <p>Closed – December 2022.</p> <p>Closed - January 2023.</p> |
|                             | <p>IV. Section 6.1 of protocol 62 states “The PEHO shall plan a file review based on the EHS Business Plan.” The EHS business plan for 2021 states, “At least 3 food control files per S/EHO shall be reviewed”. In two local areas audited, the audit team noted that only 1 file per S/EHO was reviewed and completed for 2021.</p>   | The EHS Operational Plan for 2021 was not completed in full due to the re-prioritisation of EHS activities associated with the Covid 19 pandemic. | Closed   |   |        | Closed   |

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| 3 | Audit findings              | Ensure the status of the "position paper on effectiveness Version 2" is clear as to whether it is the procedure to be implemented to determine the effectiveness of official controls or whether it is still in development. | <p>The "position paper on effectiveness Version 2" was circulated to the EHS on 19<sup>th</sup> March 2014. This document was subject to audit by the FSAI in 2017 with no associated findings or corrective actions. It was updated to reflect the wording of Regulation 2017/625 without changing the existing position and was again circulated to the EHS on 24<sup>th</sup> June 2022.</p> <p>By way of clarification the document describes the interpretation of the EHS of effectiveness and outlines the existing measures in place to determine the effectiveness of official controls and the existing range of control verification procedures. The document allows for the further development of toolkits to assist in providing consistent definition of activities to verify effectiveness.</p> | Closed                   |   |        | Closed                           |
| 4 | Audit findings              | Ensure that all non-compliances with food law identified during the inspection of bottled water establishments are closed out.   | EHS will reassess in July 2023 whether the remaining non – compliances with food law have been closed by the FBOs.  | Closed - July 2023       |   |        | Closed - July 2023               |




Food Safety Authority of Ireland  
The Exchange, George's Dock, IFSC,  
Dublin 1, D01 P2V6

T +353 1 817 1300  
E [info@fsai.ie](mailto:info@fsai.ie)

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