

Appendix 1

Dover Port Health Authority Position Report 16th September 2020

1. Role of Port Health Authorities

1.1. Port Health Authorities (PHAs) undertake a range of health controls at the port including Sanitary and Phytosanitary (SPS) checks on imported food, inspecting ships for infectious disease control and food safety, as well as general public and environmental health checks. Port health officers (PHOs) (specialist environmental health officers) and official veterinarians (OVs) are employed by the local authority or port health authority to undertake this work.

2. Current role of Dover PHA

2.1. Dover PHA is responsible for enforcing port health controls at the Port of Dover and the Channel Tunnel. SPS checks on high risk foods can take place at a port with a Border Control Point (BCP). There is currently a BCP within the Port of Dover which handles a limited number of high-risk foods not of animal origin (HRFNAO) imported via RoRo. There is no BCP at the Channel Tunnel and therefore high-risk foodstuffs from outside EU, commonly known as 'rest of world' (RoW), must not enter via this port unless checks have been undertaken at a BCP in the EU prior to arriving in the UK.

2.2. Despite the huge volumes of trade which arrive at the Port of Dover daily (10,000+ lorries), DPHA is only required to enforce imported food controls on a very small number of Rest of World (RoW) foodstuffs. This is partly because no checks are required on EU origin foods but also because the majority of RoW products will have already been inspected at the first point of entry into the EU and will not require any further checks upon arrival at Dover. There remains a small number of RoW high-risk foods not of animal origin which are permitted to travel onwards to Dover for their checks to be completed, and it is these goods on which DPHA will undertake food controls. Specifically, these products include pistachios from Iran and figs, hazelnuts and pistachios from Turkey.

2.3. In addition to imported food controls, Port Health Officers are also responsible for conducting documentary checks on organic foodstuffs from outside the EU and on catch certificates accompanying non-EU fishery products.

2.4. Under the current regime, Dover PHA is able to meet service demand with 1.6 FTE, and can complete the work within the Council's standard operating hours Monday to Friday, 09:00 – 17:00.

3. How the Brexit situation has evolved with regards to Port Health

- 3.1. Over the past 3 years officers from the Dover Port Health Authority (DPHA) have been engaged and involved in the Brexit process and local border delivery planning. There has been regular attendance and additional communications with representatives from ministerial departments and non-ministerial agencies, including the Food Standards Agency (FSA), DEFRA, DfT, BPDG, Border Force, HMRC, Port of Dover, Channel Tunnel, trade groups and local agents. Officers from DPHA have repeatedly expressed and documented their concerns that the generic controls that were originally planned were not practical at the Port of Dover or the Channel Tunnel. This was due to the specific location, logistics and sheer quantity of traffic and movement of goods through the two sites. This was widely acknowledged by government agencies, traders and local agents.
- 3.2. During the initial planning stages, DPHA were advised that trade which could not be accommodated through Dover, by virtue of the fact that it required importing via a Border Control Point (BCP) with the relevant status, would be redirected to an alternative port with the necessary facilities. Dover Port and the Channel Tunnel both clearly expressed that they did not have the space required and would not be able to build or facilitate BCP's within their port confines. Currently, due to biosecurity risks, legislation precludes the relevant checks from being undertaken outside of the Port confines. To date this remains the situation.
- 3.3. In practice this meant that Dover PHA would most likely see a minimal increase in imported food controls (i.e. organics and IUU fish), as higher risk foodstuffs (that require the most stringent and time-consuming controls) would not be able to enter the UK via the two ports. This remained the communicated position, until approximately May 2020, when it was expressed during a Border Delivery Group meeting that a site in Ashford had been agreed and it would be used to conduct Sanitary and Phytosanitary (SPS) control checks for both the Port of Dover and Channel Tunnel sites. Again, under current legal framework Dover PHA has no jurisdiction outside of its area and hence the responsibility for the Port Health function would fall to Ashford Borough Council (ABC).
- 3.4. In late June Dover PHA became indirectly aware that there were further discussions taking place regarding a second site to be located within Dover District to facilitate SPS checks foodstuffs entering via the Port of Dover. It was proposed that the site in Ashford would be used for goods arriving via the Channel Tunnel only.
- 3.5. In order to enable Dover PHA to commence preparations for this proposed new facility, we have repeatedly requested confirmation from DEFRA regarding:
- Where the Dover site will be, who will own/manage it and what facilities will be available for inspections and accommodating staff etc.
 - Who will have responsibility for undertaking the Port Health SPS checks at this site,
 - Who will have responsibility for undertaking the Port Health SPS checks at the Ashford site,
 - What the required checks will consist of (documentary, physical, sampling)
 - The anticipated amount of trade and hence number of checks required at each site.
 - What funding will be available for the start up costs.

However, to date very little information has been forthcoming on many of these points.

3.6 What we do now know, following very recent DEFRA advice, is that the new Dover facility will be built as a Border Control Point, although the exact location of the site has yet to be confirmed. As a BCP, Dover PHA will be responsible for conducting all imported food controls for EU and rest of world (RoW) foodstuffs arriving via Dover Port by the end of the transition period.

3.7 Legal responsibility for imported food examinations at the Ashford site remain unconfirmed.

4 Implementation timescales

4.1 The Border Operating Model was published in late July which outlines a staged approach to the new requirements. The impact on Dover PHA is as follows:

Imp. Date	EU POAO & HRFNAO	RoW POAO & HRFNAO	EU & RoW Organics	EU & RoW IUU (Fish)	EU Export Health Certs
1 Jan 21	No new requirements.	No change anticipated as BCP not in place, subject to DEFRA confirmation.	Assumed doc. checks on EU products in addition to existing RoW (Awaiting DEFRA confirmation)	Assumed doc. checks on EU products in addition to existing RoW (Awaiting MMO confirmation)	Unknown – awaiting confirmation from DEFRA
1 April 21	Remote documentary checks (away from port).	As above	As above	As above	As above
1 July 21	Documentary, identity, physical & sampling checks at BCP	Assumed doc, identity, physical & sampling checks	As above	As above	As above

POAO – Products of Animal Origin

HRFNAO – High Risk Food Not of Animal Origin

RoW – Rest of World

MMO – Marine Management Organisation

5 Scale of new requirements

5.1 The scale of the impact is still relatively unknown. Dover PHA, along with all other UK Ports have, over the last 3 years, consistently been requesting data from relevant government departments and agencies on current trading levels. As there is no legal requirements for EU manifest details to be provided at UK ports this information simply is not available. As such, full details of the total number of

imports arriving via Dover and the Channel Tunnel requiring examination is not known.

5.2 However, on 24th July 2020 all PHA's were contacted by DEFRA and provided with anticipated import figures of EU POAO requiring checks from PHA. The extent of the requirements can be demonstrated when comparing DEFRA estimates with the number of import checks undertaken by Dover PHA in 2019/2020. It is important to acknowledge that the data provided by DEFRA does not include high-risk foods not of animal origin, transits, organics, IUU fish and export health certificates, for which data remains unavailable.

	2019/20 Dover Import Controls Conducted	Dover Predicted Import Controls required	2019/20 Channel Tunnel Import Controls Conducted	Channel Tunnel Predicted Import Controls required
EU POAO	0	94,041	0	124,212
RoW POAO	0	Unknown (Insufficient data available)	0	Unknown (Insufficient data available)
EU HRFNAO	0	Unknown (Insufficient data available)	0	Unknown (Insufficient data available)
RoW HRFNAO	71	Unknown (Insufficient data available)	0	Unknown (Insufficient data available)
Organics and IUU (Fish)	1031	Estimated 3,000 – 10,000	0	Unknown (Insufficient data available)
Export Health Certificates	0	Unknown (Insufficient data available)	0	Unknown (Insufficient data available)

6. Required Staffing Levels and Funding

6.1 Imported food control is only a very small part of the current Port Health service. The main activities currently revolve around ship inspections and infectious diseases. As such existing imported food controls are conducted by just 1.5 FTE (1 FTE administrative support, 0.5 FTE Competent officer).

6.2 Based on DEFRA's anticipated EU POAO figures, it is assumed that a 24/7 port health service will be required. Having utilised a ratio of service demand against staff provided by a similar UK Port with existing POAO responsibilities, it is anticipated that Dover PHA will require in the region of 140 FTE to fulfil their responsibilities relating to EU POAO alone. An unknown number of additional staff will be required to enable them to conduct ALL required imported food control checks.

6.3 Under existing legislation, PHA's are required to provide sufficient staffing levels to meet demand, with responsibility for provision of infrastructure and facilities falling to the port operator. Based on this continuing assumption all PHA costs will relate to resourcing, training and equipment for Port Health staff to operate the service. With regards to EU POAO, in order to facilitate a 24 hour, 7 day a week

Port Health Service this equates to an additional 141 staff including 18 specialist Port Health Officers and 18 Official Veterinarians.

- 6.4 Following the submission of a bid earlier in the year, the Food Standards Agency (FSA) allocated Dover PHA £40,000 to be spent by March 2021 on transition preparations.
- 6.5 Further to this, DEFRA have recently opened a 'Transition Fund' for the recruitment and start up process for EU POAO Port Health staff only, to be spent by March 2021 on transition preparations. A bid of **£4,110,543.80** has been submitted under this by Dover PHA for the period up until the end of March 2021 (Appendix 1). No funding has been identified as yet beyond this date.
- 6.6 The government's current focus is prioritised by the new requirement to examine EU POAO. Little attention has been given to the control of Organic and IUU products. It has been confirmed that, from 1st January 2021 such products exported from the EU will require endorsement by Dover PHA. Although no government body is able to confirm the exact figures, it is anticipated that the increase will be in the region of 3000 -10,000 per annum. This increase is not accounted for in any bidding provisions from government. The expectation is that the PHA will recruit posts specifically for this income generating function before the 1st January 2021. Based on the figures supplied an additional 3 Technical officers need to be recruited and in post by November/December to enable necessary in-house training to take place prior to implementation on 1st January.

7. Summary of risks and concerns

- 7.1 Nationally, in terms of Port Health, there has been a significant disconnect throughout this transition period between policy and delivery, as well as a lack of co-ordination between multiple government departments and agencies.
- 7.2 A table outlining all of Dover PHA's current concerns is set out in Appendix 2. All points have been consistently raised and documented by Dover PHA over the last 3 years with all relevant government departments. However, despite this, even at this late stage, there remains a lack of clarity on key factors including:
- The detail of the controls and checks that will be required by the PHA
 - The overall volume of trade (not just POAO) and hence number of checks required in relation to all functions (POAO, HRFNAO, Organics, IUU)
 - Location and specification of BCP
 - Funding availability up until end of March 2021 (Bid submitted but no timescale for approval)
 - Funding commitments beyond April 2021 (As it currently stands any financial risk falls to the PHA beyond end March)
 - What the future charging mechanism will be for the service
 - Availability of competent PHO and OVS and what contingencies are in place for a national shortage
- 7.3 However, what is clear is that the magnitude of what PHA's are required to put in place is not deliverable within the timescale set out by government. Essentially Dover PHA will need to redesign and implement a port health service of immense

scale in just a few months without the necessary financial securities or technical capabilities being available.

7.4 There are many risks and implications of the PHA not being border ready including:

- a)** Inaccurate trade volume predictions:
 - Should the predicted volume of trade not materialise it may result in insufficient income to cover costs (financial risk to the PHA).
 - Should the predicted volume of trade exceed what is expected the PHA may not be able to cope with demand resulting in delays.
- b)** Inability to recruit sufficient numbers of appropriately qualified / trained individuals due to a nationwide shortage preventing the service from operating fully.
- c)** Changes in trade and frequency of imports could result in significant impacts on the port operator, Dover and the PHA:
 - Should the BCP not be ready in time, importers will be required to re-route goods to an alternative BCP of the correct status.
 - If goods cannot be effectively processed in a timely manner at Dover, importers will choose to find the quickest and most cost-effective trade route.

Appendix 1 – PHA Transition Fund Application

<p>1. Please complete the following details (future correspondence will be via the contact point names provided):</p>			
Lead Local Authority Name:	Port Health Authority Name: Dover Port Health Authority		
Contact Point Name:	Contact Point Name: Lucy Manzano / Beverley Edmondson		
Local Authority Address:	Port Health Authority Address: Dover District Council Council Offices White Cliffs Business Park Whitfield Dover CT16 3PJ		
Telephone:	Telephone: 01304 872216		
Email:	Email: lucy.manzano@dover.gov.uk / beverley.edmondson@dover.gov.uk		
<p>2. Total funding being bid for?</p> <p>01 Oct 2020 to 31 Mar 2021 = <u>£4,110,543.80</u> (£3,736,858 + 10% contingency)</p> <p>Total 12 month cost estimate <u>£8,221,087.60</u> (£7,473,716 + 10% contingency)</p>			
<p>3. Please provide a detailed breakdown of how you plan to spend these funds, including the cost of each item and a description of why it is necessary</p>			
Cost	Item	Necessity of this item	When you intend to incur this expenditure
1440000	18 x OVs	Essential	Jan/Feb/Mar 2021
950580	18 x PHOs	Essential	Jan/Feb/Mar 2021
2256120	54 x PHSOs	Essential	Jan/Feb/Mar 2021
1404450	45 x AO	Essential	Jan/Feb/Mar 2021
316860	6 x Team Leaders	Essential	Jan/Feb/Mar 2021
84150	3 x HR	Essential	Immediate
165900	3 x Legal	Essential	Jan/Feb/Mar 2021
125340	3 x IT	Essential	Jan/Feb/Mar 2021
120000	2 Project Managers	Essential	Immediate
42300	PPE for 141 staff	Essential	Jan/Feb/Mar 2021

252766	Office Equipment – IT equipment, laptop, tablet, mobile, etc.	Essential	Jan/Feb/Mar 2021
315250	Unsocial Shift Allowance	Essential	

4. Please provide detail on the impact of not receiving funding for any of the items listed above

SPS checks would not be able to be undertaken on EU POAO Imports if funding was not provided. If only partial funding was made available, there would be significant delays to checks and food would not reach the shelves inland, resulting in national food shortages.

It is anticipated that the BCP will have approval for all categories of food products from all countries – EU and Rest of World. Biosecurity could be compromised if Rest of World trade arrives at Dover but is not checked because of insufficient staff available to undertake imported food controls.

5. Please provide a delivery plan and outline of risks to delivery

*****The availability of this funding only being up until 31st March 2021 means the delivery plan cannot be achieved – additional, guaranteed funding is required beyond March 2021. Without this, DPHA will be unable to undertake SPS checks at the BCP.*****

The recruitment of staff can only take place once funding has been agreed. The recruitment process takes a minimum of 3 months. Staff will require training – it is unknown who will undertake this training and how long the training will take especially as Dover Port Health Authority (DPHA) is not a BCP and has no experience in POAO import controls. To ensure new staff are competent in their roles, training usually takes 6 months (including on the job training). We would expect DEFRA to assist with providing this training and organising is centrally to ensure all staff are training expediently and competently and can be ready for undertaking SPS checks as of 1st April 2021.

Risks / Concerns

The funding is only available until 31st March 2021. Currently there is no additional funding available after this date which means there will be a significant funding gap and one which Dover District Council would not be able to fill. With no guaranteed funding, it will not be possible to undertake SPS checks on EU POAO imports.

Due to the late notification of the bid, there is insufficient time to recruit the minimum numbers of staff required to staff the BCP.

There is currently no BCP at Dover and if one is not provided ed by 01/07/2021 or if authorisation has not been granted by this date, EU POAO imports will not be able to enter through Dover.

If the proposed BCP is not of a suitable size to handle the number of goods (EU and Rest of World) or does not have the appropriate facilities including sufficient accommodation for port health staff, SPS checks will not be able to be undertaken.

There has been no information provided on the charging regime for import controls to enable DPHA to calculate whether staffing costs etc. will be adequately covered by the future income generated by SPS checks.

A significant increase in workload in other areas of imported food controls – high risk food not of animal origin and products of animal origin from third countries, organics, catch certificates and potentially export health certificates – could impact SPS checks if there are insufficient staff.

If the data provided by Defra is an underestimation and volumes of trade far exceed these figures, the service that has been planned for will not be able to meet this additional demand.

If the data provided by Defra is an over estimation and volumes of trade are significantly less than predicted, DPHA will not be able recoup staffing costs etc. and there will be a huge financial shortfall.

A lack of qualified EHOs and port health trained OV's to fulfil the PHO and OV posts will mean that there will be a delay in completing SPS checks (e.g. signing of CHEDS).

An inability to recruit staff in Dover, as has been seen in the past with any new role in the Public Protection team, suggests that it will be impossible to fill the 141 posts.

Insufficient time to train staff to undertake checks by 1st April / 1st July 2021

A training burden on PHA due to lack of centrally organised training available from the Competent Authority (Defra).

Insufficient time available to deliver training.

An expectation from Defra that DPHA would be able to assist other ports because of their limited imported food control knowledge and spending time dealing with these queries will hinder undertaking our own SPS controls.

Insufficient time to develop departmental policies and procedures.

Lead Applicant's name	Lucy Manzano
Lead Applicant's signature	Lucy Manzano
Authorised person's name	Diane Croucher
Authorised person's signature	Diane Croucher
Date when form was completed	11/09/2020

Appendix 2: Issues Log/Key Concerns:

Issue	Explanation	Action Taken	Outcome
<p>1. Confirmation of Site/Inspection Facility</p>	<p>Confirmation of the site and its ownership is needed immediately. A strong working relationship with the facility provider is key to ensuring examinations can be conducted appropriately.</p>	<p>Action Taken: DEFRA have advised that site ownership has not been agreed. Dover PHA have requested that the council are included in any considerations of potential commercial ownership (i.e. approached along with other partners to see if they would like to own the site (as a commercial enterprise opportunity)). Dover PHA have repeatedly requested that DEFRA confirm the location of the site. They have stated that they cannot as it remains commercially sensitive despite the impact its authorisation will have on the authority.</p>	<p>Outstanding response required from DEFRA.</p>
<p>2. Access to Site/Inspection facility Plans</p>	<p>Facilities must be designed and maintained to specifications outlined in legislation/guidance etc. to enable the site to be fully authorised. Without access to specifications we are unable to plan where the anticipated staff of 140+ will be accommodated i.e. will office space, car parking and welfare facilities be provided on site etc? Will the provision itself be suitable for food examinations? How will it be shared and used with other multiple agencies? Will sufficient space be available for all vehicles presenting, which could be 1,000's each day?</p>	<p>Action taken: Dover PHA have asked DEFRA and FSA to include Dover PHA in any infrastructure planning discussions and groups as we are aware that meetings are taking place, but so far the authority has been excluded from these. Dover PHA have also requested copies of BCP concept plans, which have been shared with other ports, but not Dover. DEFRA have been emailed repeatedly regarding this. This has also been raised with the Short Straits & South East Border and Protocol Delivery Group.</p>	<p>Outstanding response required from DEFRA.</p>
<p>3. Secure Funding</p>	<p>Access to funding has been made available from DEFRA, but only until March 2021 when it must all be spent. Therefore, there is a substantial funding gap and risk to</p>	<p>Action taken: Requested confirmation from DEFRA as to what money will be available post March 2021. DEFRA have</p>	<p>Await confirmation from DEFRA.</p>

	<p>the council post March 2021. Although it is assumed that funding streams will be made available, this has not been confirmed and this presents a significant financial risk to the council who will be the employer of approximately 140+ new staff with an anticipated annual staffing cost of in excess of £8 million.</p> <p>Income will be generated from checks, but this will take several months and potentially years to match the initial start-up costs etc.</p> <p>The risk of being able to fund these posts long term is further increased by the total number of goods requiring checks remaining unknown, as well as a significant variability in trade routes. This is further hampered by inconsistent government guidance and direction as well as the presentation of unverified and unvalidated import data to work from.</p> <p>All of these factors impact greatly on our ability to plan and instigate an appropriate service. Because for example we could end up with staff outnumbering the actual checks required, or staff being outnumbered substantially by the actual checks required. The real volumes will not be known until the checks and systems required are communicated by government and traders choose their preferred trade routes, which is heavily waited on the time it takes to import through a certain port against the costs incurred.</p>	<p>said they are unable to confirm financial assistance post March, but they are working on this and have raised it within their departments. They have informed Dover PHA that they are awaiting direction from the Treasury.</p>	
<p>4. Recruitment of Staff</p>	<p>There is a Port Health recruitment crisis (which includes the availability of Vets). It is widely acknowledged within the profession, that there are not enough qualified PHO's within the UK to fill the posts required nationally by the end of the transition period. To undertake import checks, port</p>	<p>Action taken: Requested confirmation from the FSA of the total number of registered PHO's in the UK to see, as a simple starting point, if there are currently enough PHO's in the UK to fill the posts.</p>	<p>Unresolved. FSA to confirm existing total numbers of</p>

	<p>health staff must be competent to the specification outlined by the FSA in its Code of Practice. There is a national shortage of competent officers. All ports will be seeking to recruit PHO's at unprecedented levels to cover the additional checks. Wider specialists will also be needed to assist the setup of the new service i.e. with experience of analysing data, HR/Recruitment, project management, accountancy, IT etc. all of which are areas of expertise that fall outside of the knowledge of the existing Port Health Team.</p>	<p>Dover PHA have also requested that the FSA review the training requirements so that local authorities can recruit appropriate individuals with key attributes to train quickly in specific areas of port health. The FSA have confirmed that they are working on an update to the Code of Practice, but that this will not be confirmed until approximately January 2021. Dover PHA advised that this is too late and must be accelerated. Specialist staff (HR, IT etc,) recruitment has been covered within the DEFRA bid. Mutual aid is not an option as all PHA's and indeed our neighbouring authorities are in the same position and will be seeking to recruit additional specialist staff.</p>	<p>registered EHO/PHO's in UK and confirm qualification amendments.</p>
<p>5. Logistics of Recruiting of 141 Staff</p>	<p>As outlined above it is confidently anticipated that the authority will not be able to recruit 18 PHO's, 18 Vets, 54 Technical Officers and 45 Administrative Officers and 6 EHO's. There are also no training provisions available to offer quick and relevant training to get people up and running. Individuals that currently work as technical officers would have to obtain the accredited Higher Certificate before they could work as PHO's under the current regime. Courses are currently only run at Birmingham and Nottingham, and we are informed that capacity has not been increased or considered. To recruit 141 new members of staff is a massive undertaking by any stretch, and in effect it is equivalent to setting up a SME or new district council in itself. Therefore, HR assistance and support would be required to draft job specifications, place adverts, shortlist, invite to interview and then post interview in the job offering stage, personnel checks etc.</p>	<p>Action taken: Outlined to the FSA and DEFRA the need to review the training requirements and access to it. The provision of specialist organisational staff (HR, IT etc.) has been covered in the DEFRA bid and contract/specialist agencies will be approached if successful.</p>	<p>Await outcome of Bid and updates from FSA.</p>

	all of which are extremely time consuming and cannot be absorbed by the existing team.		
6. Training of Staff	All staff involved with the new facility will require extensive training. Currently there are no training courses available for port health staff to attend. This is a significant risk. Suitably qualified staff is one issue, competency to undertake checks is another. Dover PHA internal training is a 3-6 months shadowing process before full authorisation is given. There will be a compromise between timeframe and training.	Action taken: Outlined to the FSA and DEFRA the urgent need for PHO training to be made available, as there is currently none. The FSA are looking into this, but currently no training has been outlined.	Await confirmation from DEFRA and FSA.
7. Service Design/Policies/ Procedures	The new facility will involve checks that are new and unfamiliar to the existing staff. The new regime will need a different set up to the existing service we provide. Our current processes are based around third country imports. From 01/01/2021, EU POAO will become our primary import. These checks (which have not been confirmed) remain entirely unknown. Understanding the framework within which we are required to deliver checks is essential.	Action taken: This has been outlined to the FSA and DEFRA and requests for clear guidance, direction and details of what checks and how to conduct them have been requested. No detail or further information has been provided by the agencies on what we must do. To assist us we have approached counterparts at larger ports who are experienced in POAO examinations, but not in EU trade.	Await confirmation from DEFRA and FSA.
8. Inventory/IT systems	No electronic systems in place to pre-notify, identify, hold, advise of examination and/or clearance of controlled goods entering via the port that require examination. Without a full integrated inventory system goods will not be able to be processed through the facility. Training on any new systems and processes is essential.	Action Taken: This has been repeatedly raised with the FSA and DEFRA however, no progress or developments have been presented. Government focus has been on other systems including IPAFFS (which is a separate system and does not cover inventory) Partial delivery of IPAFFS Training has taken place.	Await confirmation from DEFRA and FSA.
9. Timeframe	The timeframe remaining to implement full checks from 1 st July 2021 is not achievable.	Action Taken: Continue to urge the FSA and DEFRA to be more transparent and quickly exchange and share information that is critical to our service delivery.	Unactionable

<p>10. Impact on Trade</p>	<p>Because we have not been informed of what the checks will be, we are unable to inform trade so that they can prepare for and conduct their own training on IT systems, what documentation they will need etc. Disruption to flow is inevitable as neither trade or government agencies are ready for the end of the transition period, as we remain uninformed as to what the checks will be (and the Border Delivery Model is not sufficiently detailed to cover this). New systems and procedures will be used, and traders, importers and agents must be made aware of these in a timely manner. Trade are already contacting Dover PHA for advice on what to do, but we are unable to provide them with clear direction as we do not know ourselves.</p>	<p>Action Taken: Urged DEFRA and the FSA to provide clear guidance (over and above the very general layout of the Border Operating Model). Attend BIFFA trade association meetings.</p>	<p>Await confirmation from DEFRA and FSA of what controls will actually be.</p>
<p>11. Insufficient Administrative Support for Organic and IUU Checks to be conducted January 2021</p>	<p>The government's focus is prioritised on the new requirement to examine EU POAO. No attention has been placed on the legal requirement to control Organic and IUU (sea fish) products. It has been confirmed that Organic and IUU products from the EU will from the 1st January 2021, be required to be endorsed by Dover PHA. Although all government bodies are unable to confirm the exact figures, it has been confirmed that the increase is anticipated to be substantial and in the region of 3-10,000. This increase is not accounted for in any bidding provisions from government and the expectation is that PHA will recruit posts specifically for this income generating function.</p>	<p>Action Taken: Obtain CEO authorisation to recruit 3 Technical officers as a matter of urgency to be in post by November/December to enable in-house training to be conducted. Of note the current charge for Organic Checks is £45 and a range of charges are made for IUU endorsements from £20-£83.</p>	<p>CEO to authorise recruitment.</p>
<p>12. Unconfirmed status of Export Health Certificates</p>	<p>Contradictory exchanges of information have been shared regarding where export health certificates will be issued (LA at point of production of PHA at point of export).</p>	<p>Action Taken: Repeatedly raised question with Defra. Remains at outstanding question on the Port Steering Group log.</p>	<p>Awaiting confirmation from DEFRA.</p>

