

Failed Closed IHH

State of Maine Health Inspection Report

Establishment Name THE LIONS DEN CAFE	As Authorized by 22 MRSA § 2496	No. of Risk Factor/Intervention Violations	0	Date	11/20/2012
		No. of Repeat Risk factor / Intervention Violations	0	Time In	8:00 AM
		Score (optional)		Time Out	9:00 AM

License Expiry Date/EST. ID# 9/27/2012 / 22841	Address 631 STEVENS AVE	City PORTLAND	Zip Code 04103	Telephone 207-632-2267
License Type MUN - SCHOOL FEEDING - CATE	Owner Name J W DEVELOPMENT	Purpose of Inspection Regular	License Posted No	Risk Category High

FOODBORNE ILLNESS RISK FACTORS AND PUBLIC HEALTH INTERVENTIONS

Circle designated compliance status (IN, OUT, N/O, N/A) for each numbered item
 IN=in compliance OUT=not in compliance N/O=not observed N/A=not applicable
 Mark "X" in appropriate box for COS and/or R
 COS=corrected on-site during inspection R=repeat violation

Compliance Status			cos	R	Compliance Status			cos	R
Supervision									
1	IN	PIC present, demonstrates knowledge, and performs duties			16	IN	Proper cooking time & temperatures		
Employee Health									
2	IN	Management awareness; policy present			17	IN	Proper reheating procedures for hot holding		
3	IN	Proper use of reporting, restriction & exclusion			18	IN	Proper cooling time & temperatures		
Good Hygienic Practices									
4	IN	Proper eating, tasting, drinking, or tobacco use			19	IN	Proper hot holding temperatures		
5	IN	No discharge from eyes, nose, and mouth			20	IN	Proper cold holding temperatures		
Preventing Contamination by Hands									
6	IN	Hands clean & properly washed			21	IN	Proper date marking & disposition		
7	IN	No bare hand contact with RTE foods or approved alternate method properly followed			22	IN	Time as a public health control: procedures & record		
8	IN	Adequate handwashing facilities supplied & accessible			Consumer Advisory				
Approved Source									
9	IN	Food obtained from approved source			23	IN	Consumer advisory provided for raw or undercooked foods		
10	IN	Food received at proper temperature			Highly Susceptible Populations				
11	IN	Food in good condition, safe, & unadulterated			24	IN	Pasteurized foods used; prohibited foods not offered		
12	IN	Required records available: shellstock tags parasite destruction			Chemical				
Protection from Contamination									
13	IN	Food separated & protected			25	IN	Food additives: approved & properly used		
14	IN	Food-contact surfaces: cleaned and sanitized			26	IN	Toxic substances properly identified, stored & used		
15	IN	Proper disposition of returned, previously served, reconditioned, & unsafe food			Conformance with Approved Procedures				
GOOD RETAIL PRACTICES									
Good Retail Practices are preventative measures to control the addition of pathogens, chemicals, and physical objects into foods.									
Mark "X" in box if numbered item is not in compliance Mark "X" in appropriate box for COS and/or R COS=corrected on-site during inspection R=repeat violation									
			cos	R				cos	R
Safe Food and Water									
28	IN	Pasteurized eggs used where required			Proper Use of Utensils				
29	IN	Water & Ice from approved source			41	IN	In-use utensils: properly stored		
30	IN	Variance obtained for specialized processing methods			42	IN	Utensils, equipment, & linens: properly stored, dried, & handled		
Food Temperature Control									
31	IN	Proper cooling methods used; adequate equipment for temperature control			43	IN	Single-use & single-service articles: properly stored & used		
32	IN	Plant food properly cooked for hot holding			44	IN	Gloves used properly		
33	IN	Approved thawing methods used			Utensils, Equipment and Vending				
34	X	Thermometers provided and accurate			45	IN	Food & non-food contact surfaces cleanable, properly designed, constructed, & used		
Food Identification									
35	IN	Food properly labeled; original container			46	IN	Warewashing facilities: installed, maintained, & used; test strips		
Prevention of Food Contamination									
36	IN	Insects, rodents, & animals not present			47	X	Non-food contact surfaces clean	X	X
37	IN	Contamination prevented during food preparation, storage & display			Physical Facilities				
38	X	Personal cleanliness	X	X	48	IN	Hot & cold water available; adequate pressure		
39	IN	Wiping cloths: properly used & stored			49	IN	Plumbing installed; proper backflow devices		
40	IN	Washing fruits & vegetables			50	IN	Sewage & waste water properly disposed		
Personnel									
Person In Charge (Signature) <i>Juliana Walsh</i> Date: 11/20/2012									
Health Inspector (Signature) <i>D. Michele Sturgeon</i> Follow-up: <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO Date of Follow-up:									

Risk Factors are improper practices or procedures identified as the most prevalent contributing factors of foodborne illness or injury. Public Health interventions are control measures to prevent foodborne illness or injury.

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Temperature Observations

Location	Temperature	Notes
TURKEY CH1	42.1F	KEEP COVER CLOSED, BETWEEN USE AND ONLY ONE LAYER OF PACKAGED CONTAINERS
CRM CHS	40.1F	
HW	113F	
HAM	41.3	
TOM SOUP HH	140.1F	
3-BAY	120.1F	
SANI	200PPM	
CHICK SALAD	40.0F	
CUT TOMATOES	39.8-41.3F	

Person In Charge (Signature) Date: 11/20/2012

Juliana Walsh

Health Inspector (Signature) *D. Michael Sturgeon*

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Observations and Corrective Actions

Violations cited in this report must be corrected within the time frames below, or as stated in sections 8-405.11 and 8-406.11 of the Food Code

34: 4-302.12: N: Inadequate number of temperature measuring devices provided.

INSPECTOR NOTES: ENSURE ALL REFRIGERATED EQUIPMENT HAVE WORKING, VISIBLE, INTERNAL THERMOMETERS

38: 2-402.11: N: Food Employees not wearing effective hair restraints.

INSPECTOR NOTES: COS

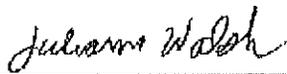
47: 4-601.11.(B): N: Food contact surfaces of cooking equipment not clean.

INSPECTOR NOTES: COS, CEILING AREA OF COFFEE MACHINE AND MICROWAVE

53: 6-501.11: N: The physical facilities are in disrepair.

INSPECTOR NOTES: REFRIGERATOR HANDLE AND CHIPPING COUNTERTOP NEED REPAIR. HANDLE IS 'ON ORDER'.

Person in Charge (Signature)



Date: 11/20/2012

Health Inspector (Signature)



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Inspection Notes

PASSED

DHHS LICENSE EXPIRED IN SEPTEMBER, 2012. NEED TO MAIL RENEWAL ASAP, WITH \$100 LATE FEE (OVER 30 DAYS). MAIL TO: DHHS / HIP, 11 SHS, AUGUSTA, ME 04333-011

Grading ~ Pass / Fail criteria

A passing inspection, is one with no more than ten (10) Non Critical violations and not more than three (3) Critical violations. Any over those thresholds, are a Failing inspection. If enough items can be COS (corrected on site), to bring the totals to the above-referenced threshold, Health Inspector will work with you on time frame(s) within which the remaining items need correction.

Follow up inspection(s) to a Failing inspection, will be invoiced, to the establishment owner, at a rate of seventy-five dollars (\$75.00), per follow up inspection, that is deemed necessary by Health Inspector. Once establishment is cleared from the original failure and placed onto a regular follow up schedule, no additional fees will be charged, until and unless a repeated failing inspection occurs.

Effective January 18, 2012, all Eating Place Establishments are required to submit a copy of their Certified Food Protection Manager certificate, except for those establishments that are exempt. A Certified Food Protection Manager (CFPM) must be hired within 90 days of a new establishment opening or when a Certified Food Protection Manager leaves employment. For a list of CFPM courses go to <http://www.maine.gov/healthinspection/training.htm>

Please provide a copy of this certification(s) to your inspector (Michele Sturgeon) by emailing to msturgeon@portlandmaine.gov or via fax (207) 874-8913. A copy may also be sent to:

City of Portland
DHHS, EHS
389 Congress St., Rm. 301B
Portland, Maine 04101
Attn.: Michele Sturgeon

Please include the name of your establishment and the establishment ID# with your certification(s). If e-mailing, place this information in the subject line area of your e-mail.

Critical violations should be corrected on site, but in any event, within 10 days. The licensee must contact the inspector when the critical violation has been addressed at 207-756-8016 or msturgeon@portlandmaine.gov Non-critical violations must be corrected no later than 90 calendar days after the inspection. The Department may approve a compliance schedule that extends beyond the time limits if a written schedule of compliance is submitted by the Permit Holder and no health hazard exists or will result from allowing an extended schedule for compliance."

A copy of this inspection report and a copy of all CFPM certificates must be available upon the Department's request.

Person in Charge (Signature)

Juliana Walsh

Date: 11/20/2012

Health Inspector (Signature)

M. Michele Sturgeon