

# City of Portland Health Inspection Report

Page 1 of 4  
Date 9/13/11

Establishment Name <b>Pats Meat Market &amp; Cafe</b>		No. of Risk Factor/Intervention Violations	Date
License/Est. ID# <b>AG 1-360</b>		No. of Repeat Risk Factor/Intervention Violations	Time In
Address <b>Stevens Ave.</b>		Score (optional)	Time Out
City/State <b>Portland, ME</b>	Zip Code <b>04102</b>	Telephone	
License Posted <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Owner Name	Purpose of Inspection <b>Compl. &amp; Reg.</b>	Risk Category <b>High</b>

## FOODBORNE ILLNESS RISK FACTORS AND PUBLIC HEALTH INTERVENTIONS

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

Compliance Status		COS	R	Compliance Status		COS	R
<b>Supervision</b>				<b>Potentially Hazardous Food Time/Temperature</b>			
51	<input checked="" type="radio"/> IN <input type="radio"/> OUT			516	<input checked="" type="radio"/> IN <input type="radio"/> OUT <input type="radio"/> N/A <input type="radio"/> N/O		
PIC present, demonstrates knowledge, and performs duties				Proper cooking time & temperatures			
<b>Employee Health</b>				<b>Consumer Advisory</b>			
52	<input checked="" type="radio"/> IN <input type="radio"/> OUT			517	<input checked="" type="radio"/> IN <input type="radio"/> OUT <input type="radio"/> N/A <input type="radio"/> N/O		
Management awareness; policy present				Proper reheating procedures for hot holding			
53	<input checked="" type="radio"/> IN <input type="radio"/> OUT			518	<input checked="" type="radio"/> IN <input type="radio"/> OUT <input type="radio"/> N/A <input type="radio"/> N/O		
Proper use of reporting, restriction & Exclusion				Proper cooling time & temperature			
<b>Good Hygienic Practices</b>				<b>Highly Susceptible Populations</b>			
54	<input checked="" type="radio"/> IN <input type="radio"/> OUT	N/O	X	519	<input checked="" type="radio"/> IN <input type="radio"/> OUT <input type="radio"/> N/A <input type="radio"/> N/O		
Proper eating, tasting, drinking, or tobacco use				Proper hot holding temperatures			
55	<input checked="" type="radio"/> IN <input type="radio"/> OUT	N/O		520	<input checked="" type="radio"/> IN <input type="radio"/> OUT <input type="radio"/> N/A <input type="radio"/> N/O		X
No discharge from eyes, nose, and mouth				Proper cold holding temperatures			
<b>Preventing Contamination by Hands</b>				<b>Chemical</b>			
56	<input checked="" type="radio"/> IN <input type="radio"/> OUT	N/O		521	<input checked="" type="radio"/> IN <input type="radio"/> OUT <input type="radio"/> N/A <input type="radio"/> N/O		
Hands clean & properly washed				Time as a public health control: procedures & record			
27	<input checked="" type="radio"/> IN <input type="radio"/> OUT <input type="radio"/> N/A <input type="radio"/> N/O			<b>Compliance with Approved Procedures</b>			
No bare hand contact with RTE foods or approved alternate method properly followed				527 <input checked="" type="radio"/> IN <input type="radio"/> OUT <input checked="" type="radio"/> N/A <input type="radio"/> N/O			
58	<input checked="" type="radio"/> IN <input type="radio"/> OUT			Compliance with variance, specialized process, & HACCP plan			
Adequate handwashing facilities supplied & accessible				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.			
<b>Approved Source</b>							
59	<input checked="" type="radio"/> IN <input type="radio"/> OUT			<b>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.</b>			
Food obtained from approved source							
510	<input checked="" type="radio"/> IN <input type="radio"/> OUT <input type="radio"/> N/A <input type="radio"/> N/O						
Food received at proper temperature							
511	<input checked="" type="radio"/> IN <input type="radio"/> OUT						
Food in good condition, safe, & unadulterated							
112	<input checked="" type="radio"/> IN <input type="radio"/> OUT <input type="radio"/> N/A <input type="radio"/> N/O						
Required records available: shellstock tags, parasite destruction							
<b>Protection from Contamination</b>							
213	<input checked="" type="radio"/> IN <input type="radio"/> OUT	N/A	X				
Food separated & protected							
214	<input checked="" type="radio"/> IN <input type="radio"/> OUT	N/A					
Food-contact surfaces: cleaned & sanitized							
515	<input checked="" type="radio"/> IN <input type="radio"/> OUT						
Proper disposition of returned, previously served, reconditioned, & unsafe food							

## 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

Compliance Status		COS	R	Compliance Status		COS	R
<b>Safe Food and Water</b>				<b>Proper Use of Utensils</b>			
528	<input checked="" type="radio"/> IN <input type="radio"/> OUT			241	<input checked="" type="radio"/> IN <input type="radio"/> OUT		
Pasteurized eggs used where required				in-use utensils: properly stored			
529	<input checked="" type="radio"/> IN <input type="radio"/> OUT			242	<input checked="" type="radio"/> IN <input type="radio"/> OUT		
Water & ice from approved source				Utensils, equipment & linens: properly stored, dried & handled			
30	<input checked="" type="radio"/> IN <input type="radio"/> OUT			243	<input checked="" type="radio"/> IN <input type="radio"/> OUT		
Variance obtained for specialized processing				Single-use & single-service articles: properly stored & used			
<b>Food Temperature Control</b>				<b>Utensil, Equipment and Vending</b>			
531	<input checked="" type="radio"/> IN <input type="radio"/> OUT			244	<input checked="" type="radio"/> IN <input type="radio"/> OUT		
Proper cooling methods used; adequate equipment for temperature control				Gloves used properly			
532	<input checked="" type="radio"/> IN <input type="radio"/> OUT			<b>Physical Facilities</b>			
Plant food properly cooked for hot holding				448	<input checked="" type="radio"/> IN <input type="radio"/> OUT		
533	<input checked="" type="radio"/> IN <input type="radio"/> OUT			Hot & cold water available; adequate pressure			
Approved thawing methods used				549	<input checked="" type="radio"/> IN <input type="radio"/> OUT		
134	<input checked="" type="radio"/> IN <input type="radio"/> OUT			Plumbing installed; proper backflow devices			
Thermometers provided & accurate				550	<input checked="" type="radio"/> IN <input type="radio"/> OUT		
<b>Food Identification</b>				Sewage & waste water properly disposed			
135	<input checked="" type="radio"/> IN <input type="radio"/> OUT			251	<input checked="" type="radio"/> IN <input type="radio"/> OUT		
Food properly labeled; original container				Toilet facilities: properly constructed, supplied, & cleaned			
<b>Prevention of Food Contamination</b>				252	<input checked="" type="radio"/> IN <input type="radio"/> OUT		
436	<input checked="" type="radio"/> IN <input type="radio"/> OUT			Garbage & refuse properly disposed; facilities maintained			
Insects, rodents, & animals not present				153	<input checked="" type="radio"/> IN <input type="radio"/> OUT		
237	<input checked="" type="radio"/> IN <input type="radio"/> OUT			Physical facilities installed, maintained, & clean			
Contamination prevented during food preparation, storage & display				154	<input checked="" type="radio"/> IN <input type="radio"/> OUT		
538	<input checked="" type="radio"/> IN <input type="radio"/> OUT			Adequate ventilation & lighting; designated areas used			
Personal cleanliness							
139	<input checked="" type="radio"/> IN <input type="radio"/> OUT						
Wiping cloths: properly used & stored							
140	<input checked="" type="radio"/> IN <input type="radio"/> OUT						
Washing fruits & vegetables							

Person in Charge (Signature) *Michael G. ...* Date: 9/13/11

Health Inspector (Signature) *Michele Sturgeon* Follow-up:  YES  NO (circle one) Follow-up Date: 9/20/11 on or about

# City of Portland Health Inspection Report

Establishment Name: Pay's Meat Market & Cafe As Authorized by 22 MRSA § 2496 Date: 9/13/11

License/EST. ID #: AT-1-360 Address: Shivers Ave. Portland, ME City/State: Portland, ME Zip Code: 04102 Telephone: \_\_\_\_\_

### TEMPERATURE OBSERVATIONS

Item/Location	Temp	Item/Location	Temp	Item/Location	Temp
<u>Cinn. 21</u>	<u>10R</u>	<u>400</u>			
<u>7V/6C/6C</u>	<u>7</u>	<u>5NC</u>	<u>8</u>	<u>Remaining</u>	
<u>Criticals need correction w/in 7 days</u>					
<u>90 Day follow up for remaining items - most to be eliminated</u>					

### 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.

- | Item Number            | 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. |
|------------------------|--|
|                        | <u>Failed</u>  |
| <u>38</u>              | <u>Hair Restraints</u>   |
| <u>53</u>              | <u>Wood counters unfin. upstairs &amp; throughout</u>  |
| <u>35</u>              | <u>Label &amp; Date all Containers</u>   |
| <u>53</u>              | <u>maps must hang betw use-off floor &amp; away from wall</u>  |
| <u>53</u>              | <u>Need covered mop buckets through &amp; walkways anchoring</u>   |
| <u>OK</u>              | <u>OK refrig. upstairs - therm. reads <u>45°</u></u>   |
| <u>-45</u>             | <u>Cutting bid. on floor</u>   |
| <u>54</u>              | <u>Unshielded light @ upstairs over hood</u>   |
| <u>38</u>              | <u>Keep pads paper &amp; flashlights separate</u>  |
| <u>37</u>              | <u>Dish tray on floor</u>  |
| <u>-45</u>             | <u>No wooden cutting bids on <del>top</del> surfaces - everywhere</u>  |
| <u>-49</u>             | <u>Dishwasher needs proper air gap</u>   |
| <u>54</u>              | <u>lights hoods needed in numerous locations</u>   |
| <u>-49</u>             | <u>ice machine needs air gap</u>   |
| <u>-14</u>             | <u>ice machine needs mold remediation asap</u>   |
| <u>54</u>              | <u>need lights hoods in basement</u>   |
| <u>OSHA &amp; Code</u> | <u>Electrical panel in downstairs dry storage needs 3' clearance</u>   |
| <u>OSHA</u>            | <u>Need MSDS - explained</u>   |
| <u>39</u>              | <u>No sponges</u>  |
| <u>49</u>              | <u>Repair leak @ 2-Bay - needs new sink asap</u>   |

Person in Charge (Signature): [Signature] Date: 9/13/11  
 Health Inspector (Signature): D. Michele Sturgeon Date: 9/13/11

# City of Portland Health Inspection Report

Establishment Name <b>Pato's Meat Market &amp; Cafe</b>		As Authorized by 22 MRSA § 2496		Date <b>9/13/11</b>
License/EST. ID # <b>AG-1-680</b>	Address <b>Stewin's Ave. Portland, ME</b>	City/State <b>Portland, ME</b>	Zip Code <b>04102</b>	Telephone

TEMPERATURE OBSERVATIONS					
Item/Location	Temp	Item/Location	Temp	Item/Location	Temp
<p style="font-size: 2em; opacity: 0.5; transform: rotate(-15deg); position: absolute; top: -40px; left: -100px;">I will Happo? (ck. w/ Mike) Glove use <u>Crust</u> ★ Post licenses visible to customers</p>					

## 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.

Item Number	Violations
- 4	Employee drinks need covers, handles & shavers
- 26	move all chemicals away from food prep / storage areas
38	many boxes on floor in freezer
- 13	Improper storage of walk in - prepared / cut couple meats - under whole
- 13	<del>many</del> damp mishapen boxes on shelf
37	5 Gal. pails & drink cases on floors
47	wooden door & door frame of walk in
- 45	Wooden chopping block tables need replacing & wood no longer permitted
36	Fruit flies present
46 & 39	Cloths cannot be used to dry - must air dry 3 bay washed items not being sanitized
53	Wooden shelves need cleaning & re-furishing
53	Broken floor tiles need replacing
- 14	Baked items cannot be reached & out in open
47	Walk in refriger. needs mold remediation
37	Food on floor walk in
53	Walk in fans need cleaning
47	Walk in door needs repair
54	Walk in light not shielded

Smooth & easily Cleanab

Person in Charge (Signature) <i>X Michael Vanth...</i>	Date <b>9/13/11</b>
Health Inspector (Signature) <i>D. Michele Sturgeon</i>	Date <b>9/13/11</b>

# City of Portland Health Inspection Report

Establishment Name <b>Pats Meat Market &amp; Cafe</b>		As Authorized by 22 MRSA § 2496		Date <b>9/13/11</b>	
License/EST. ID # <b>AB 1-68D</b>	Address <b>Stevens Ave.</b>	City/State <b>Red. ME</b>	Zip Code <b>04102</b>	Telephone	

TEMPERATURE OBSERVATIONS					
Item/Location	Temp	Item/Location	Temp	Item/Location	Temp
Crm. Milk	56°	Improper Labels			
Sani. out just	47°	Terrys Blossoms			
Clothes	50ppm	Country Candies			
		926-4482			
		Covered Bridge Contact - 838-4117			
		Pb-watch vendors			

### 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.

- | Item Number | 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. |
|-------------|--|
| 37          | Breads not covered<br>Note: no napkins @ coffee sta.<br>Note: need indiv. wrapped coffee stirrers<br>Note: Need no smoking signs 9/09 Law        |
| 21 & 35     | Packaged items need proper labeling<br>Note: Red cutting board used produce s/b meats only   |
| 53          | Caulk around all immovable equipment.  |
| 53          | Wooden shelf @ front 3-Bay needs repair  |
| 14          | Ceiling area by coffee machine needs cleaning daily  |
| 53          | Deteriorating wall behind 3-Bay  |
| 53          | Replace or refinish meat case doors out  |
| 53          | Ceiling in case repair, needs repair   |
| 35          | Label pkgd' peppers  |
| 39          | Need sani. bucket @ other end of meat display  |
| 21          | Mussels in unlabeled containers  |
| 12          | Need to see shell stock tags   |
| 23          | Consumer Advisory Req. on menu & any menu items asterisked - pg. 35  |
| 34          | Need food/crm. thermometer & proper temp monitoring  |
| 20          | Creamer & milk out of temps - discarded  |

Food exact wording

Person in Charge (Signature) <i>[Signature]</i>	Date <b>9/13/11</b>
Health Inspector (Signature) <i>[Signature]</i>	Date <b>9/13/11</b>