

# City of Portland Health Inspection Report

Establishment Name <b>Salads, Etc.</b>	No. of Risk Factor/Intervention Violations	Date <b>5/4/12</b>
	No. of Repeat Risk Factor/Intervention Violations	Time In
	Score (optional)	Time Out
License/Est. ID# <b>1004</b>	Address <b>One City Center</b>	City/State <b>Portland, ME</b>
License Posted <b>POST</b>	Owner Name <b>TO</b>	Zip Code <b>04101</b>
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Purpose of Inspection <b>City &amp; State Lic. Visible public Compl. &amp; Reg.</b>	Est. Type <b>EP</b>
Telephone		Risk Category

## 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	
<b>Supervision</b>					
51	<input checked="" type="radio"/> IN <input type="radio"/> OUT	PIC present, demonstrates knowledge, and performs duties			
<b>Employee Health</b>					
52	<input checked="" type="radio"/> IN <input type="radio"/> OUT	Management awareness; policy present		<input checked="" type="checkbox"/>	
53	<input checked="" type="radio"/> IN <input type="radio"/> OUT	Proper use of reporting, restriction & Exclusion			
<b>Good Hygienic Practices</b>					
54	<input checked="" type="radio"/> IN <input type="radio"/> OUT	N/O Proper eating, tasting, drinking, or tobacco use			
55	<input checked="" type="radio"/> IN <input type="radio"/> OUT	N/O No discharge from eyes, nose, and mouth			
<b>Preventing Contamination by Hands</b>					
56	<input checked="" type="radio"/> IN <input type="radio"/> OUT	N/O Hands clean & properly washed		<input checked="" type="checkbox"/>	
27	<input checked="" type="radio"/> IN <input type="radio"/> OUT <input type="radio"/> N/A	N/O No bare hand contact with RTE foods or approved alternate method properly followed			
58	<input checked="" type="radio"/> IN <input type="radio"/> OUT	Adequate handwashing facilities supplied & accessible		<input checked="" type="checkbox"/>	
<b>Approved Source</b>					
59	<input checked="" type="radio"/> IN <input type="radio"/> OUT	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 <input type="radio"/> N/A	Food separated & protected			
214	<input checked="" type="radio"/> IN <input type="radio"/> OUT <input type="radio"/> 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			

Compliance Status		COS		R	
<b>Potentially Hazardous Food Time/Temperature</b>					
516	<input checked="" type="radio"/> IN <input type="radio"/> OUT <input type="radio"/> N/A <input type="radio"/> N/O	Proper cooking time & temperatures			
517	<input checked="" type="radio"/> IN <input type="radio"/> OUT <input type="radio"/> N/A <input type="radio"/> N/O	Proper reheating procedures for hot holding			
518	<input checked="" type="radio"/> IN <input type="radio"/> OUT <input type="radio"/> N/A <input type="radio"/> N/O	Proper cooling time & temperature			
519	<input checked="" type="radio"/> IN <input type="radio"/> OUT <input type="radio"/> N/A <input type="radio"/> N/O	Proper hot holding temperatures			
520	<input checked="" type="radio"/> IN <input type="radio"/> OUT <input type="radio"/> N/A	Proper cold holding temperatures			<input checked="" type="checkbox"/>
521	<input checked="" type="radio"/> IN <input type="radio"/> OUT <input type="radio"/> N/A <input type="radio"/> N/O	Proper date marking & disposition			
522	<input checked="" type="radio"/> IN <input type="radio"/> OUT <input type="radio"/> N/A <input type="radio"/> N/O	Time as a public health control: procedures & record			
<b>Consumer Advisory</b>					
523	<input checked="" type="radio"/> IN <input type="radio"/> OUT <input type="radio"/> N/A	Consumer advisory provided for raw or undercooked foods			
<b>Highly-Susceptible Populations</b>					
524	<input checked="" type="radio"/> IN <input type="radio"/> OUT <input type="radio"/> N/A	Pasteurized foods used; prohibited foods not offered			
<b>Chemical</b>					
525	<input checked="" type="radio"/> IN <input type="radio"/> OUT <input type="radio"/> N/A	Food additives: approved & properly used			
526	<input checked="" type="radio"/> IN <input type="radio"/> OUT	Toxic substances properly identified, stored, & used			<input checked="" type="checkbox"/>
<b>Conformance with Approved Procedures</b>					
527	<input checked="" type="radio"/> IN <input type="radio"/> OUT <input type="radio"/> N/A	Compliance with variance, specialized process, & HACCP plan			

**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.

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

Person in Charge (Signature) X D - / C / - - Date: 5/4/12

Health Inspector (Signature) D. Michele Strogan Follow-up:  YES  NO (circle one) Follow-up Date: 5/11/12

★ Failed

Carroll cur no 1211  
plans

# City of Portland Health Inspection Report

Establishment Name <b>Salads, Etc.</b>	As Authorized by 22 MRSA § 2496	Date <b>5/4/12</b>
License/EST. ID # <b>10704</b>	Address <b>One City Ctr. Portland, ME</b>	City/State <b>Portland, ME</b>
	Zip Code <b>04101</b>	Telephone

TEMPERATURE OBSERVATIONS			
Item/Location	Temp	Item/Location	Temp
Ranch	45.0	★ Bleach recipe for food contact surfaces is 1 teaspoon bleach per 1 gal. 75-120°F water - 1/2 tsp. every 24 hrs. or when visibly soiled	
Mushrooms	45.0		
Chick salad	46-49		
Th island	41		
Avocado	58.6/1	★ Knowingly operating w/out state license	
Boiled eggs	48		
Hummus	57		

### 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 51: 2em. Bathroom ea. stall needs covered waste receptacle
- Item 8: " " needs empl.
- 26: Sanitoxic - trained COS
- 47: Stone needs thorough cleaning
- 47: exterior of all equipmt. needs thorough cleaning
- 54: Ceiling vents need cleaning
- 20: Improper cold hold - if using time as a control, need posted policy
- 45: Cutting boards needs planing or replacement
- 34: No thermometers for taking temps - get & know how to calibrate
- 53: Major cleaning needed everywhere
- 53: Chipping counters need repair
- 53: Caulking around all immovable equipmt. needed
- 26: medicines stored on shelf above stove need moving
- 34: thermometers required inside all repair equipmt.
- 14: 2-Bay has to be used in a 3-Bay fashion
- 8: Handwash sta. needs signage & waste can
- 14: Some pipe draining into 2-Bay - cannot be COS
- 26: Hand sanitizer cannot be stored alongside food prep cutting boards
- 2: PIC Knowledge COS
- 6: Improper handwashing COS

15V/8C/4C COS/NO NA COS

Needs e-mailing Date

Person in Charge (Signature) <i>[Signature]</i>	Date <b>5/4/12</b>
Health Inspector (Signature) <i>D. Michele Sturgeon</i>	Date <b>5/4/12</b>