

| | | | | | |
|---|---------------------------------|-----------------------------------|---|----------|----------|
| Establishment Name RIVERTON ELEMENTARY SCHOOL | As Authorized by 22 MRSA § 2496 | Critical Violations | 0 | Date | 1/9/2020 |
| | | Non-Critical Violations | 0 | Time In | 11:00 AM |
| | | Certified Food Protection Manager | Y | Time Out | 12:00 PM |

| | | | | |
|---|---------------------------------------|----------------------------------|------------------------|---------------------------|
| License Expiry Date/EST. ID# 9/27/2020 / 931 | Address 1600 FOREST AVE | City PORTLAND | Zip Code 04103-1314 | Telephone 207-874-8210 |
| License Type MUN - EATING - SCHOOL | Owner Name PORTLAND SCHOOL DEPARTM | Purpose of Inspection Regular | License Posted Yes | Risk Category Medium |

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 |
|--|----|--|-----|---|
| Supervision | | | | |
| 1 | IN | PIC present, demonstrates knowledge, and performs duties | | |
| Employee Health | | | | |
| 2 | IN | Management awareness; policy present | | |
| 3 | IN | Proper use of reporting, restriction & exclusion | | |
| Good Hygienic Practices | | | | |
| 4 | IN | Proper eating, tasting, drinking, or tobacco use | | |
| 5 | IN | No discharge from eyes, nose, and mouth | | |
| Preventing Contamination by Hands | | | | |
| 6 | IN | Hands clean & properly washed | | |
| 7 | IN | No bare hand contact with RTE foods or approved alternate method properly followed | | |
| 8 | IN | Adequate handwashing facilities supplied & accessible | | |
| Approved Source | | | | |
| 9 | IN | Food obtained from approved source | | |
| 10 | IN | Food received at proper temperature | | |
| 11 | IN | Food in good condition, safe, & unadulterated | | |
| 12 | IN | Required records available: shellstock tags parasite destruction | | |
| Protection from Contamination | | | | |
| 13 | IN | Food separated & protected | | |
| 14 | IN | Food-contact surfaces: cleaned and sanitized | | |
| 15 | IN | Proper disposition of returned, previously served, reconditioned, & unsafe food | | |

| Compliance Status | | | cos | R |
|--|----|---|-----|---|
| Potentially Hazardous Food Time/Temperature | | | | |
| 16 | IN | Proper cooking time & temperatures | | |
| 17 | IN | Proper reheating procedures for hot holding | | |
| 18 | IN | Proper cooling time & temperatures | | |
| 19 | IN | Proper hot holding temperatures | | |
| 20 | IN | Proper cold holding temperatures | | |
| 21 | IN | Proper date marking & disposition | | |
| 22 | IN | Time as a public health control: procedures & record | | |
| Consumer Advisory | | | | |
| 23 | IN | Consumer advisory provided for raw or undercooked foods | | |
| Highly Susceptible Populations | | | | |
| 24 | IN | Pasteurized foods used; prohibited foods not offered | | |
| Chemical | | | | |
| 25 | IN | Food additives: approved & properly used | | |
| 26 | IN | Toxic substances properly identified, stored & used | | |
| Conformance with Approved Procedures | | | | |
| 27 | IN | 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 |
|---|----|---|-----|---|
| Safe Food and Water | | | | |
| 28 | IN | Pasteurized eggs used where required | | |
| 29 | IN | Water & ice from approved source | | |
| 30 | IN | Variance obtained for specialized processing methods | | |
| Food Temperature Control | | | | |
| 31 | IN | Proper cooling methods used; adequate equipment for temperature control | | |
| 32 | IN | Plant food properly cooked for hot holding | | |
| 33 | IN | Approved thawing methods used | | |
| 34 | IN | Thermometers provided and accurate | | |
| Food Identification | | | | |
| 35 | IN | Food properly labeled; original container | | |
| Prevention of Food Contamination | | | | |
| 36 | IN | Insects, rodents, & animals not present | | |
| 37 | IN | Contamination prevented during food preparation, storage & display | | |
| 38 | IN | Personal cleanliness | | |
| 39 | IN | Wiping cloths: properly used & stored | | |
| 40 | IN | Washing fruits & vegetables | | |

| Compliance Status | | | cos | R |
|--|----|--|-----|---|
| Proper Use of Utensils | | | | |
| 41 | IN | In-use utensils: properly stored | | |
| 42 | IN | Utensils, equipment, & linens: properly stored, dried, & handled | | |
| 43 | IN | Single-use & single-service articles: properly stored & used | | |
| 44 | IN | Gloves used properly | | |
| Utensils, Equipment and Vending | | | | |
| 45 | IN | Food & non-food contact surfaces cleanable, properly designed, constructed, & used | | |
| 46 | IN | Warewashing facilities: installed, maintained, & used; test strips | | |
| 47 | IN | Non-food contact surfaces clean | | |
| Physical Facilities | | | | |
| 48 | IN | Hot & cold water available; adequate pressure | | |
| 49 | IN | Plumbing installed; proper backflow devices | | |
| 50 | IN | Sewage & waste water properly disposed | | |
| 51 | IN | Toilet facilities: properly constructed, supplied, & cleaned | | |
| 52 | IN | Garbage & refuse properly disposed; facilities maintained | | |
| 53 | IN | Physical facilities installed, maintained, & clean | | |
| 54 | IN | Adequate ventilation & lighting; designated areas used | | |

Person in Charge (Signature) *Colleen Sperles* Date: 1/9/2020
 Health Inspector (Signature) *Tom Williams*
 TOM WILLIAMS Follow-up: YES NO Date of Follow-up:

State of Maine Health Inspection Report

| | | | | |
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Temperature Observations

| Location | Temperature | Notes |
|------------|-------------|-----------|
| MILK CHEST | 38F | |
| REACHIN | 39F | |
| HOT WATER | 110F | HAND SINK |

| | | |
|-----------|---------|-------|
| SANITIZER | 400 PPM | 3-BAY |
|-----------|---------|-------|

Person in Charge (Signature)

Colleen Sperles

Date: 1/9/2020

Health Inspector (Signature)

Tom Williams

TOM WILLIAMS

State of Maine Health Inspection Report

Page 3 of 4

Establishment Name

RIVERTON ELEMENTARY SCHOOL

Date 1/9/2020

License Expiry Date/EST. ID#
9/27/2020 /931

Address
1600 FOREST AVE

City / State
PORTLAND ME

Zip Code
04103-1314

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

Person in Charge (Signature)



Date: 1/9/2020

Health Inspector (Signature)



TOM WILLIAMS

State of Maine Health Inspection Report

Page 4 of 4

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City / State
PORTLAND

ME

Zip Code
04103-1314

Inspection Notes

Certified Food Protection Manager: Joann Sparks EXP 3/13/20 PIC: Joann
NO VIOLATIONS NOTED DURING THIS INSPECTION.

Unless directed otherwise, all Eating Establishments are required to submit a copy of their Certified Food Protection Manager (CFPM) certificate. A CFPM must be hired at the time of a new eating establishment opening or within 60 days of when a CFPM leaves employment. For a list of CFPM courses and trainers go to <http://www.maine.gov/healthinspection/training.htm>
Please provide a copy of this certification(s) to Tom Williams by emailing tw@portlandmaine.gov or faxing to (207) 756-8111. Please include the name of your establishment and the establishment ID# with your certification(s).

Employee Health Policy:

The Health Inspection Program has implemented an educational public health initiative on Employee Health on March 1, 2017. The policy handouts will be provided to you by your inspector and reviewed during inspection for compliance. They are also available on the Program's website: <http://www.maine.gov/healthinspection>

Violation Correction Timeframe:

Critical violations should be corrected on site, but in any event, within 10 days. The licensee must contact the inspector when a violation has been addressed at 874-8772. Non-critical violations must be corrected within 30 days. Failure to satisfactorily correct these violations before the follow-up inspection may result in enforcement proceedings by the Department to include fines and penalties. License renewals can be denied if violations are not corrected within the noted timeframes.

C= Critical violation and NC= Non-critical violation:

“ Critical violation” means a provision of the Food Code that, if in non-compliance, is more likely than other violations to contribute to food contamination, illness or environmental health hazard.

Additional Inspection Fee:

License fees provide for two inspections per year. When additional inspections are required, the Department may charge an additional \$100 fee to cover the costs of each additional inspection or visit.

Document Retention/Posting:

Pursuant to the Maine Food Code, the establishment's current license must be displayed. In addition, a sign or placard must be posted in a conspicuous area notifying consumers that a copy of the most recent inspection report is available upon request. CFPM certificates must be posted in a conspicuous area and must be available to the Department upon request.

Person in Charge (Signature)



Date: 1/9/2020

Health Inspector (Signature)

TOM WILLIAMS

