

## QUABBIN HEALTH DISTRICT

Serving the Communities of: Belchertown, Ware and Pelham Suite D, 126 Main Street Ware, MA 01082 Phone: (413) 967-9615 Fax: (413) 967-9646



Food Establishment Inspection Report

Insp Date: 1/20/2023 Business ID: B3000003 Inspection: B3000044

Business: Dunkin' Donuts Permit #:

16 Federal St. **Phone:** 413-323-0504

Inspector: 02 Sainath Palani

Belchertown, MA 01007 Reason: 01. Routine
Next Inspection on or near: 5/20/2023

Results: Next Routine 120

Time In / Time Out

	ut						
Date	In	Out	Insp	Travel	Total	Mileage	Notes
01/20/23	10:00 AM	11:04 AM	1:04	0:00	1:04	0	
Total:			1:04	0:00	1:04	0	

#### Inspection Summary

Official Order for Correction: Based on an inspection today, the items marked "OUT" indicated violations of 105 CMR 590.000 and applicable sections of the 2013 FDA Food Code. This report, when signed below by a Board of Health member or its agent constitutes an order of the Board of Health. Failure to correct violations cited in this report may result in suspension or revocation of the food establishment permit and cessation of food establishment operations. If you are subject to a notice of suspension, revocation, or non-renewal pursuant to 105 CMR 590.000 you may request a hearing before the board of health in accordance with 105 CMR 590.015(B).

PIC Name Colleen Fish	Risk Category Low									
Certified Food Protection Manager Colleen Fish	CFPM Exp Date 02/06/2023									
Certified Allergy Trained Name Colleen Fish	Allergy Exp Date 02/06/2023 ChokeSaver Exp Date									
Certified ChokeSaver Name										
Permit Posted In $ abla$ Out $ abla$										
Inspection Report Available In $\uppi$ Out $\upbeta$										
FOODBORNE ILLNESS RISK FACTORS AND PUBLIC HEALTH INTERVENTIONS										
Compliance status: IN = in compliance OUT = not in compliance N/O = not observed N	<b>N</b> /A = r	not app	olicabl	е						
Marked in appropriate box for COS and/or R. COS = corrected on-site during inspection	nR=	repea	t viola	ition						
Risk factors are improper practices or procedures identified as the most prevalent contrib Public Health Interventions are control measures to prevent foodborne illnesses or injury.	uting f	actors	of foc	dborr	ne illne	ss or injury				
Supervision	IN	OUT	N/O	N/A	cos	REPEAT				
1. Person-in-charge present, demonstrates knowledge, and performs duties	¤	i	i	i		••				
2. Certified Food Protection Manager	¤	i	i	i	••					
This item has Notes. See Footnote 1 at end of questionnaire.										

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Food Establishment inspection	Keh	ort				
Employee Health	IN	OUT	N/O	N/A	cos	REPEAT
3. Management, food employee and conditional employee; knowledge, responsibilities and reporting	¤	İ	i	i		
4. Proper Use of Restriction & Exclusion	¤	i	i	i	••	
5. Procedures for responding to vomiting and diarrheal events	¤	i	i	i		••
Good Hygienic Practices	IN	OUT	N/O	N/A	cos	REPEAT
6. Proper eating, tasting, drinking, or tobacco use	¤	i	i	i		
This item has Notes. See Footnote 2 at end of questionnaire.						
7. No discharge from eyes, nose, and mouth	¤	i	i	i	••	
Preventing Contamination by Hands	IN	OUT	N/O	N/A	cos	REPEAT
8. Hands clean & properly washed	¤	i	i	i	••	
9. No bare hand contact with RTE food	¤	i	i	i		
This item has Notes. See Footnote 3 at end of questionnaire.						
10. Adequate handwashing sinks properly supplied and accessible	¤	i	i	i	••	
Approved Sources	IN	OUT	N/O	N/A	cos	REPEAT
11. Food obtained from approved source	¤	i	i	i		••
12. Food received at proper temperature	i	i	¤	i		••
13. Food in good condition, honestly presented, safe, & unadulterated	¤	i	i	i		
14. Required records available: shellstock tags, parasite destruction	i	i	i	¤		
Protection from Contamination	IN	OUT	N/O	N/A	cos	REPEAT
15. Food separated and protected	i	¤	i	i	þ	
16. Food-contact surfaces: cleaned & sanitized	¤	i	i	i		••
This item has Notes. See Footnote 4 at end of questionnaire.						
17. Proper disposition of returned, previously served reconditions, & unsafe food	¤	i	i	i		••
Time/Temperature Control for Safety	IN	OUT	N/O	N/A	cos	REPEAT
18. Proper cooking time & temperatures	i	i	i	¤	••	
19. Proper reheating procedures for hot holding	i	i	¤	i		
20. Proper cooling time and temperature	i	i	¤	i		••
21. Proper hot holding temperatures	¤	i	i	i		••
This item has Notes. See Footnote 5 at end of questionnaire.						
22. Proper cold holding temperatures	¤	i	i	i		••
This item has Notes. See Footnote 6 at end of questionnaire.						
23. Proper date marking and disposition	¤	i	i	i		
24. Time as a Public Health Control	i	i	i	¤	••	
Consumer Advisory	IN	OUT	N/O	N/A	cos	REPEAT
25. Consumer advisory provided for raw / undercooked foods	i	i	i	¤		

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Highly Susceptible Populations (HSP)		IN	OUT	N/O	N/A	cos	REPEAT
26. Pasteurized foods used; prohibited foods not offered		i	i	i	¤	••	
Food/Color Additives and Toxic Substances		IN	OUT	N/O	N/A	cos	REPEAT
27. Food additives: approved and properly used		i	i	i	¤	• •	
28. Toxic substances identified, stored, and used		¤	i	i	i		
Conformance with Approved Procedures		IN	OUT	N/O	N/A	cos	REPEAT
29. Compliance with variance / specialized process / HACCP Plan		i	i	i	¤		••
GOOD RETAIL PRACTICES							
Good Retail Practices are preventative measures to control the addition of path	ogens, che	mical	s, and	physic	cal ob	jects i	nto foods.
IN = In compliance OUT = not in compliance COS - corrected on -site during	j inspectior	n RE	PEAT =	= repe	eat vio	olation	
Safe Food and Water		IN	OUT	N/O	N/A	cos	REPEAT
30. Pasteurized eggs used where required		i	i	i	¤		••
31. Water & ice from approved source		i	i	i	i		••
32. Variance obtained for specialized processing methods		i	i	i	¤		
Food Temperature Control		IN	OUT	N/O	N/A	cos	REPEAT
33. Proper cooling methods used; adequate equipment for temperature cor	ntrol	i	i	i	¤		••
34. Plant food properly cooked for hot holding		i	i	i	¤		
35. Approved thawing methods used		i	i	i	i		••
36. Thermometers provided and accurate		i	i	i	i		
Food Identification		IN	OUT	N/O	N/A	cos	REPEAT
37. Food properly labeled; original container		i	i	i	i		••
Prevention of Food Contamination		IN	OUT	N/O	N/A	cos	REPEAT
38. Insects, rodents, & animals not present		i	i	i	i		••
39. Contamination prevented during food preparation, storage and display		i	i	i	i		••
40. Personal cleanliness		i	i	i	i	••	••
41. Wiping cloths; properly used and stored		i	¤	i	i	þ	••
42. Washing fruits & vegetables		i	i	i	i	••	••
Proper Use of Utensils		IN	OUT	N/O	N/A	cos	REPEAT
43. In-use utensils properly stored		i	i	i	i		••
This item has Notes. See Footnote 7 at end of questionnaire.							
44. Utensils, equipment & linens: properly stored, dried, & handled		İ	İ	i	İ		
45. Single-use/ single service articles: properly stored and used		İ	İ	i	i		
46. Gloves used properly		i	i	i	i	••	

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Colleen Soja

	Utensils, Equipment and Vending				N/A	OS	REPEAT
	47. Food & non-food contact surfaces cleanable, properly designed, constructed & use	ed i	i	i	i		
	This item has Notes. See Footnote 8 at end of questionnaire.						
	48. Warewashing facilities: installed, maintained, & used; test strips	i	i	i	i	••	••
	49. Non-food contact surfaces clean	i	i	i	i	••	••
	Physical Facilities	IN	OUT	N/O	N/A	cos	REPEAT
	50. Hot & cold water available; adequate pressure	i	i	i	i	••	••
	51. Plumbing installed; proper backflow devices	i	i	i	i	••	••
	52. Sewage and waste water properly disposed	i	i	i	i	••	••
	53. Toilet features: properly constructed, supplied, & cleaned	i	¤	i	i	••	••
	54. Garbage & refuse properly disposed; facilities maintained	i	i	i	i		••
	55. Physical facilities installed, maintained, & clean	i	¤	i	i		••
	56. Adequate ventilation & lighting; designated areas used	i	i	i	i		• •
M	ASSACHUSETTS ONLY REGULATIONS						
Ru	Rules and Regulations adopted for use in Massachusetts only.						
	Additional Requirements listed in 105 CMR 590.011	IN	OUT	N/O	N/A	cos	REPEAT
	M1. Anti-choking procedures in food service establishment	i	i	i	¤		••
	M2. Food allergy awareness	¤	i	i	i	••	••
	Review of Retail Operations listed in 105 CMR 590.010	IN	OUT	N/O	N/A	cos	REPEAT
	M3. Caterer	i	i	i	i	••	••
	M4. Mobile Food Operation	i	i	i	i	••	••
	M5. Temporary Food Establishment	i	i	i	i	••	••
	M6. Public Market; Farmers Market	i	i	i	i		••
	M7. Residential Kitchen; Bed-and-Breakfast Operation	i	i	i	i	••	••
	M8. Residential Kitchen: Cottage Food Operation	i	i	i	i		• •
	M9. School Kitchen; USDA Nutrition Program	i	i	i	i	••	• •
	M10. Leased Commercial Kitchen	i	i	i	i	••	
	M11. Innovative Operation	i	i	i	i		••
	Local Requirements	IN	OUT	N/O	N/A	cos	REPEAT
	L1. Local law or regulation	i	i	i	i		
	L2. Other	i	i	i	i	••	• •

Water build-up on floor in front of ice chest\\ mop frequently or try to address this issue another way

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Discussion with Person-in-Charge

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# Food Establishment Inspection Report Fail Notes Summary

	Fail Notes Summary
Code	Text
2. Certified Food Prote	ection Manager
	e Footnote 1 at end of questionnaire.
6. Proper eating, tasting	ng, drinking, or tobacco use
This item has Notes. Se	e Footnote 2 at end of questionnaire.
9. No bare hand conta	ct with RTE food
This item has Notes. Se	e Footnote 3 at end of questionnaire.
15. Food separated an	
3-302.11(A)(3-8)(B)	Core; Container of cold brew in walk in fridge was uncovered (COS)
16. Food-contact surfa	ces: cleaned & sanitized
This item has Notes. Se	e Footnote 4 at end of questionnaire.
21. Proper hot holding	temperatures
This item has Notes. Se	e Footnote 5 at end of questionnaire.
22. Proper cold holding	g temperatures
This item has Notes. Se	e Footnote 6 at end of questionnaire.
41. Wiping cloths; prop	perly used and stored
3-304.14	Core; One of the sanitizer buckets was cloudy by the espresso machine (COS)
43. In-use utensils pro	perly stored
This item has Notes. Se	e Footnote 7 at end of questionnaire.
	ontact surfaces cleanable, properly designed, constructed & used
This item has Notes. Se	e Footnote 8 at end of questionnaire.
40 Non food control	
49. Non-food contact s	
4-601.11(B),(C)	Core; Surface of racks in the walk-in fridge had a little food debris on them
50 T. T. (	
	perly constructed, supplied, & cleaned
5-501.17	Core; Add a mini container for feminine products to women's bathroom
	nstalled, maintained, & clean
6-501.11	Core; Handwash sink in the mens room was not working\\ handwash sink by 3-bay sink makes
	loud sound when used\\ Tile by floor drain in front of ice chest was in disrepair\\ tiles around floor
	drains in front of 3-bay sink were in disrepair\\ There were holes in the ceiling tiles above mop
	sink\\ replace ceiling tile or add a covering where furnace piping goes through ceiling\\ repair
	wall area in the hallway where there is exposed wood
6-202.19	Core; There was a large pot hole in the drive thru line

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#### Footnote 1

Notes:

One of Food Protection Manager's certifications is expiring sooon

#### Footnote 2

Notes:

Store has a designated area for staff drinks

#### Footnote 3

Notes:

Staff were wearing gloves when handling RTE foods

#### Footnote 4

Notes:

Quat sanitizer used\\ Sanitizer Buckets: ~200 ppm, one was cloudy by the expresso machine and was replaced on-site\\ 3-bay sink: 300ppm

#### Footnote 5

Notes:

Egg patties: 153F

#### Footnote 6

Notes:

Front coke fridge: 39.2F\\ fridge under hot chocolate machine: 38.8F\\ bain marie: 40.0F\\ walkin: 35.6F

#### Footnote 7

Notes:

Cups of hot waterm(139F) were used to store in-use utensils

#### Footnote 8

Notes:

Rack in walk-in fridge is beginning to rust

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