

## **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: 3/17/2023 Business ID: Q3000019 Inspection: Q3000075

Business: Janine's Frostee Permit #:

149 East St. **Phone:** 413-967-7950

Ware, MA 01082 Inspector: 02 Sainath Palani Reason: 03. Pre-operation

Next Inspection on or near: 7/15/2023

Results: Next Routine 120

Time In / Time Out

THILD HIT THILD C	ut						
Date	In	Out	Insp	Travel	Total	Mileage	Notes
03/17/23	10:05 AM	11:00 AM	0:55	0:00	0:55	0	
Total:			0:55	0:00	0:55	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 Roger Morrisette	Risk Category Medium								
Certified Food Protection Manage	CFPM Exp Date 02/25/2027								
Certified Allergy Trained Name	Certified Allergy Trained Name Brittany Morrissette								
Certified ChokeSaver Name	ChokeSaver Exp Date03/01/2024								
Permit Posted	In ¤ Out ¡								
Inspection Report A	Available In ¤ Out <sub>İ</sub>								
FOODBORNE ILLNESS RISK FACTORS AND PUBLIC HEALTH INTERVENTIONS									
Compliance status: IN = in compliance OUT = not in compliance N/O = not observed N/A = not applicable									
Marked in appropriate box for COS and/or R. COS = corrected on-site during inspection R = repeat violation									
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 illnesses or injury.									
Supervision		IN	OUT	N/O	N/A	cos	REPEAT		
1. Person-in-charge present, dem	¤	i	i	i	••				
2. Certified Food Protection Mana	¤	i	i	i					

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Food Establishment inspection i	•					
Employee Health	IN	OUT	N/O	N/A	cos	REPEAT
<ol><li>Management, food employee and conditional employee; knowledge, responsibilities and reporting</li></ol>	¤	İ	İ	İ		
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		
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		
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		••
16. Food-contact surfaces: cleaned & sanitized	¤	i	i	i		
This item has Notes. See Footnote 1 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		••
22. Proper cold holding temperatures	¤	i	i	i		• •
This item has Notes. See Footnote 2 at end of questionnaire.						
23. Proper date marking and disposition	¤	İ	i	İ	••	
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	¤	••	••
Highly Susceptible Populations (HSP)	IN	OUT	N/O	N/A	cos	REPEAT
26. Pasteurized foods used; prohibited foods not offered	i	i	i	¤		

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•	•					
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 pathogens, c	chemicals	s and	nhvsi	cal ob	iects i	nto foods
					-	
IN = In compliance OUT = not in compliance COS - corrected on -site during inspect	ION KEI	ZEAT:	= repe	eat vic	nation	
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 control	i	i	i	¤		
34. Plant food properly cooked for hot holding	i	i	i	¤		
35. Approved thawing methods used	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		
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	i	••	• •
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		
44. Utensils, equipment & linens: properly stored, dried, & handled	i	i	i	i		
45. Single-use/ single service articles: properly stored and used	i	i	i	i		
46. Gloves used properly	i	i	i	i		
Utensils, Equipment and Vending	IN	OUT	Γ N/C	N/A	os	REPEAT
47. Food & non-food contact surfaces cleanable, properly designed, constructed &	usad İ	¤	i	i	••	••
	useu					
48. Warewashing facilities: installed, maintained, & used: test strips	i	i	i	i	••	••

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M1. Anti-choking procedures in food service establishment  M2. Food allergy awareness  Review of Retail Operations listed in 105 CMR 590.010  IN OUT  M3. Caterer  M4. Mobile Food Operation  M5. Temporary Food Establishment  M6. Public Market; Farmers Market  M7. Residential Kitchen; Bed-and-Breakfast Operation  M8. Residential Kitchen: Cottage Food Operation  M9. School Kitchen; USDA Nutrition Program  M10. Leased Commercial Kitchen  M11. Innovative Operation  i j  M11. Innovative Operation	T N/0	OUT N	/O N/	A OS	REPEAT
50. Hot & cold water available; adequate pressure  51. Plumbing installed; proper backflow devices  52. Sewage and waste water properly disposed  53. Toilet features: properly constructed, supplied, & cleaned  54. Garbage & refuse properly disposed; facilities maintained  55. Physical facilities installed, maintained, & clean  56. Adequate ventilation & lighting; designated areas used  i j  MASSACHUSETTS ONLY REGULATIONS  Rules and Regulations adopted for use in Massachusetts only.  Additional Requirements listed in 105 CMR 590.011  M1. Anti-choking procedures in food service establishment  M2. Food allergy awareness  Review of Retail Operations listed in 105 CMR 590.010  M3. Caterer  M4. Mobile Food Operation  M5. Temporary Food Establishment  M6. Public Market; Farmers Market  M7. Residential Kitchen; Bed-and-Breakfast Operation  M8. Residential Kitchen: Cottage Food Operation  M9. School Kitchen; USDA Nutrition Program  M10. Leased Commercial Kitchen  M11. Innovative Operation  i j  Local Requirements  IN OUT	i	i i	i		••
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M10. Leased Commercial Kitchen	i	i i	i		••
M11. Innovative Operation	i	i i	i		
Local Requirements IN OUT	i	i i	i		••
	i	i i	i		••
L1. Local law or regulation j j	N/O	OUT N/	O N/A	cos	REPEAT
	i	i i	i		••
L2. Other j j	i	i i	i		

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# Food Establishment Inspection Report Fail Notes Summary

	i ali Notes Sullillary						
Code	Text						
16. Food-contact surfaces: cleaned & sanitized							
This item has Notes	. See Footnote 1 at end of questionnaire.						
22. Proper cold hole	ding temperatures						
This item has Notes	. See Footnote 2 at end of questionnaire.						
23. Proper date ma	urking and disposition						
3-501.17(D)-(G)	Core; Just labeling items with prep. dates\\ start also labeling with use-by dates, which is up to 6						
	days after prep. date						
38. Insects, rodents	s, & animals not present						
6-202.15	Core; On rear door, screen was ripped and there was a gap along the bottom						
47. Food & non-foo	od contact surfaces cleanable, properly designed, constructed & used						
4-501.11	Core; One of the racks in the fridge across from the flat top stove was rusty						
54. Garbage & refu	54. Garbage & refuse properly disposed; facilities maintained						
5-501.11	Core; Grease receptacle was on the grass						
	•						
M2. Food allergy av	wareness						
[590.011(C)]	MA; Post allergen awareness poster in the kitchen						

Inspector

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### Footnote 1

#### Notes:

Using Chlorine sanitzer\\ had discussion as reminder how to set up 3-bay and how to prepare food grade sanitizer for food contact surfaces

#### Footnote 2

#### Notes:

Walkin:35F\\ all fridges: <41F\\ freezers all working

Inspector

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