

## 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: 10/12/2023 Business ID: Q3000027 Inspection: Q3000114

Business: Nikos Permit #:

118 Main St. **Phone:** 413-967-0469

Ware, MA 01082 Inspector: 03 John Prenosil Reason: 01, Routine

Next Inspection on or near: 2/9/2024

Results: Next Routine 120

Time In / Time Out

| THILD HIT THILD O | ut       |          |      |        |       |         |       |
|-------------------|----------|----------|------|--------|-------|---------|-------|
| Date              | In       | Out      | Insp | Travel | Total | Mileage | Notes |
| 10/11/23          | 11:10 AM | 01:45 PM | 2:35 | 0:00   | 2:35  | 0       |       |
| Total:            |          |          | 2:35 | 0:00   | 2:35  | 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 Niko Christodoulou           |  |                          | Risk Category Medium |         |        |          |               |           |  |  |
|---------------------------------------|--|--------------------------|----------------------|---------|--------|----------|---------------|-----------|--|--|
| Certified Food Protection Manager     | r Nikolaos Christodoulou   | CFPM Exp Date 04/20/2024 |                      |         |        |          |               |           |  |  |
| Certified Allergy Trained Name        |  |                          | Allergy              | у Ехр   | Date   |          |               |           |  |  |
| Certified ChokeSaver Name             |  | Cho                      | okeSav               | er Ex   | o Date | e        |               |           |  |  |
| Permit Posted                         | In ¤ Out j   |                          |                      |         |        |          |               |           |  |  |
| Inspection Report A                   | vailable In ¤ Out <sub>İ</sub>   |                          |                      |         |        |          |               |           |  |  |
| FOODBORNE ILLNESS RISK FACTOR         | RS AND PUBLIC HEALTH INTERVENTIONS   |                          |                      |         |        |          |               |           |  |  |
| Compliance status: IN = in compliance | e OUT = not in compliance N/O = not observe  | ed N/A =                 | not app              | olicab  | le     |          |               |           |  |  |
| Marked in appropriate box for COS and | //or R. COS = corrected on-site during inspe   | ection R =               | repea                | t viola | ition  |          |               |           |  |  |
|                                       | procedures identified as the most prevalent commeasures to prevent foodborne illnesses or inju |                          | factors              | of foc  | odbori | ne illne | ess or injury | /.        |  |  |
| Supervision                           |  | IN                       | OUT                  | N/O     | N/A    | cos      | REPEAT        |           |  |  |
| 1. Person-in-charge present, dem      | onstrates knowledge, and performs duties   | i                        | ¤                    | i       | i      |          |               |           |  |  |
| 2. Certified Food Protection Mana     | ger  | ¤                        | i                    | i       | i      |          |               |           |  |  |
| MANA 1                                |  |                          |                      |         |        |          |               |           |  |  |
|                                       |  |                          |                      |         |        |          |               |           |  |  |
| Inspector                             | Acknowledged Receipt : Niko C  | hristodo                 | ulou                 |         |        |          |               | Page 1 of |  |  |

| Employee Health   | IN   | OUT | N/O | N/A | cos | REPEAT |
|---|------|-----|-----|-----|-----|--------|
| 3. Management, food employee and conditional employee; knowledge, responsibilitie and reporting | es į | ¤   | 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   |     |        |
| 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   |     | þ      |
| 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 | REPEA  |
| 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 1 at end of questionnaire.                                    |      |     |     |     |     |        |
| 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   | i    | ¤   | i   | i   | ••  | ••     |
| 24. Time as a Public Health Control   | i    | İ   | İ   | ¤   |     | ••     |
| Consumer Advisory   | IN   | OUT | N/O | N/A | cos | REPEA  |
| 25. Consumer advisory provided for raw / undercooked foods                                      | ¤    | i   | i   | i   | ••  |        |
| Highly Susceptible Populations (HSP)  | IN   | OUT | N/O | N/A | cos | REPEA  |
| 26. Pasteurized foods used; prohibited foods not offered  | i    | i   | i   | ¤   |     | ••     |

Inspector

| •  |          |        |        |         |          |            |
|--|----------|--------|--------|---------|----------|------------|
| 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, ch | nemicals | s. and | physi  | cal of  | oiects i | nto foods. |
| IN = In compliance OUT = not in compliance COS - corrected on -site during inspection    |          |        |        |         |          |            |
|  |          | LAI    | – repe | sat vit | Jialion  |            |
| 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      | i       |          | ••         |
| 36. Thermometers provided and accurate   | i        | ¤      | i      | i       |          | þ          |
| 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       |          | ••         |
| 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       | ••       |            |
| 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       | OU     | Г N/С  | O N/A   | A OS     | REPEAT     |
| 47. Food & non-food contact surfaces cleanable, properly designed, constructed & us      | sed İ    | ¤      | i      | i       | ••       | þ          |
| 48. Warewashing facilities: installed, maintained, & used; test strips                   | i        | i      | i      | i       |          |            |

Inspector

| Utensils, Equipment and Vending                                | IN | OUT | Г N/С | ) N/A | os  | REPEAT |
|--|----|-----|-------|-------|-----|--------|
| 49. Non-food contact surfaces clean                            | i  | ¤   | i     | i     |     | þ      |
| 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     |     |        |
| 52. Sewage and waste water properly disposed                   | i  | i   | i     | i     |     |        |
| 53. Toilet features: properly constructed, supplied, & cleaned | i  | i   | i     | i     |     |        |
| 54. Garbage & refuse properly disposed; facilities maintained  | i  | ¤   | i     | i     | ••  | • •    |
| 55. Physical facilities installed, maintained, & clean         | i  | ¤   | i     | i     | ••  | þ      |
| 56. Adequate ventilation & lighting; designated areas used     | i  | ¤   | i     | i     | ••  | ••     |
| MASSACHUSETTS ONLY REGULATIONS                                 |    |     |       |       |     |        |
| 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     |     | þ      |
| M2. Food allergy awareness                                     | i  | 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     |     |        |

### Discussion with Person-in-Charge

Local Requirements

L2. Other

M11. Innovative Operation

L1. Local law or regulation

Cord on dough roller has exposed wires. Grease trap under three bay sink needs to be cleaned. Storage of fryer oil outside is full and top was open. Needs to be emptied and lid kept closed. PIC stated grease trap and storage container will be emptied this week.

AMM

Inspector Acknowledged Receipt : Niko Christodoulou

OUT N/O N/A COS REPEAT

# Food Establishment Inspection Report Fail Notes Summary

|                              | Fail Notes Summary  |
|------------------------------|---|
| Code                         | Text  |
| 1. Person-in-charge preser   | nt, demonstrates knowledge, and performs duties                                       |
| 2-102.11(A)                  | Priority Foundation; PIC not performing duties pertaining to food safety              |
|                              |   |
| 3. Management, food empl     | oyee and conditional employee; knowledge, responsibilities and reporting              |
| 2-102.11(C) (2),(3) and (17  |   |
| 2 102111(0) (2);(0) 4114 (17 | , Thomas Tourisation, no omployed health reporting forme of accumentation             |
| 5. Procedures for respondi   | ng to vomiting and diarrheal events   |
| 2-501.11                     | Priority Foundation; no vmoit/diarrhea cleanup kit or written procedural plan         |
| 2 001.11                     | Thomy Touridation, no vinoly diamnou dioundp kit of written procedural plan           |
| 8. Hands clean & properly    | washed  |
| 2-301.14                     | Priority; no handwashing observed by food handlers                                    |
| 2 001.14                     | Thomas, no handwashing observed by food handiers                                      |
| 15. Food separated and pro   | ntantad   |
| 3-302.11(A)(3-8)(B)          | Core; pizza sauce stored in opened metal can in Gatorade cold holding unit. Metal can |
| 3-302.11(A)(3-6)(B)          | is not a food container that can be used to store its contents once open.             |
| 2 204 45(A)                  | Priority; Observed PIC not changing gloves after tasks such as washing a utensil and  |
| 3-304.15(A)                  |   |
|                              | then proceeding to handle food.   |
| 10 5 1 1 1 1 1 1 1 1 1 1     | 1 10 20 1   |
| 16. Food-contact surfaces:   |   |
| 4-601.11(A)                  | Priority Foundation; can opener blade soiled. needs to be cleaned. Deli slicer, dough |
|                              | roller, and other slicers all soiled with visible food debris. Evidence of infrequent |
|                              | cleaning. Sheet pans soiled with baked on grease.                                     |
|                              |   |
| 21. Proper hot holding tem   |   |
| This item has Notes. See Foo | tnote 1 at end of questionnaire.  |
|                              |   |
| 22. Proper cold holding ten  | nperatures  |
| This item has Notes. See Foo | tnote 2 at end of questionnaire.  |
| 00 D                         | 1.290   |
| 23. Proper date marking ar   |   |
| 3-501.17(D)-(G)              | Core; no date marking done for sliced deli foods, lasagna, and other food items       |
|                              | prepped and stored for more than 24 hours.  |
|                              |   |
| 36. Thermometers provided    | d and accurate  |
| 4-204.112(A)-(D)             | Core; Refrigerator containing alcohol needs a thermometer inside                      |
|                              |   |
| 38. Insects, rodents, & anir | nals not present  |
| 6-202.13                     | Core; Bait boxes for rodents on shelving below prep table located next to canned food |
|                              | items. Please move bait boxes and place away from food items.                         |
|                              | · · ·   |
| 39. Contamination prevente   | ed during food preparation, storage and display                                       |
| 3-305.14                     | Core; Food items in containers stored uncovered. Food items in freezer stored         |
|                              | uncovered.  |
| 3-305.11                     | Core; Bag of onions stored on the floor.  |
| 0 000111                     |   |
| 43. In-use utensils properly | stored  |
| 3-304.12                     | Core; Improper scoops used for bulk salt and sugar                                    |
| 0 007.12                     | Coro, improper scoops asoa for bailt sait and sugar                                   |
| 47 Food 8 pan food conta     | ct surfaces cleanable, properly designed, constructed & used                          |
| 47. FUUL & HUIT-1000 COMA    | ci suriaces ciearianie, property designed, constitucted à used                        |

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| Code                     | Text   |
|--------------------------|--|
| 4-101.11(A)              | Priority; Cardboard and paper used to line shelves under prep tables. These are not surfaces that can be washed and cleaned. REplace with a material that can be washed and sanitized.   |
| 4-501.11                 | Core; Freezer by fryers/cookers has a gasket that is in disrepair. Please replace.   |
| 49. Non-food contact s   | surfaces clean   |
| 4-602.13                 | Core; Blue Air Freezer needs to be defrosted. Walk in cooler has an accumulation of dust on the fans and ceiling. Please clean. Bulk containers of salt and sugar visibly soiled. Please clean. Inside of freezer next to fryers/cookers needs to be cleaned.  |
| 51. Plumbing installed:  | proper backflow devices  |
| 5-205.15(A)              | Priority; Active plumbing leak under sink in men's bathroom. Three bay sink nit draining. PIC indicated they had scheduled plumber to repair.  |
|                          |  |
|                          | properly disposed; facilities maintained   |
| 5-502.11                 | Core; Empty plastic containers (spices, vinegar, etc.)stored under prep tables. Discard and do not reuse. Mop sink has standing dirty water.   |
| EE DI MANAGEMENT         |  |
|                          | nstalled, maintained, & clean  |
| 6-501.12                 | Core; Walls behind slicing equipment soiled. Need to be cleaned. Grease storage container outside needs to be cleaned. Grease accumulation on top of container and on ground surrounding container. Ceiling tile in top left corner over 3-bay sink needs to be repaired. Outlet cover missing on outlet under prep table with dough roller. |
| 6-501.11                 | Core; Flooring in kitchen has multiple tiles in disrepair.   |
| 56. Adequate ventilation | on & lighting; designated areas used   |
| 6-303.11                 | Core; Insufficient lighting in back prep area by slicers.  |
| M1. Anti-choking proce   | edures in food service establishment   |
| [590.011(A)]             | MA; No Choke Saver certification. More than 25 seats in establishment.   |

AMM

### Footnote 1

### Notes:

meatballs - hot holding unit - 140F sausage - hot holding unit - 141F pizza sauce - hot holding unit - 67F

### Footnote 2

### Notes:

cooked chicken - sub station - 41F mayonnaine - front bain marie - 40F raw marinating chicken - under grill 39F

AMM

Inspector Acknowledged Receipt : Niko Christodoulou Page 7 of 7