



# 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:** 11/13/2023    **Business ID:** Q3000024  
**Business:** Crystal Springs  
 166 West St.  
 Ware, MA 01082

**Inspection:** Q3000129  
**Permit #:**  
**Phone:** 413-768-7221  
**Inspector:** 03 John Prenosil  
**Reason:** 01. Routine  
**Next Inspection on or near:** 11/23/2023

**Results:** Follow-up 10 days

### Time In / Time Out

Date	In	Out	Insp	Travel	Total	Mileage	Notes
11/13/23	09:55 AM	12:00 PM	2:05	0:00	2:05	0	
<b>Total:</b>			2:05	0:00	2:05	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 Michael Santos Risk Category Medium  
 Certified Food Protection Manager Yasser Fares CFPM Exp Date 03/12/2023  
 Certified Allergy Trained Name Yasser Fares Allergy Exp Date 09/14/2026  
 Certified ChokeSaver Name \_\_\_\_\_ ChokeSaver Exp Date \_\_\_\_\_

Permit Posted                    In  Out   
 Inspection Report Available In  Out

### 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, demonstrates knowledge, and performs duties	i	x	i	i	..	..
2. Certified Food Protection Manager	i	x	i	i	..	..

Inspector

\_\_\_\_\_  
 Acknowledged Receipt : Michael Santos

## Food Establishment Inspection Report

Employee Health	IN	OUT	N/O	N/A	COS	REPEAT
3. Management, food employee and conditional employee; knowledge, responsibilities and reporting	i	☒	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	..	..
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	..	..
<b><i>This item has Notes. See Footnote 1 at end of questionnaire.</i></b>						
22. Proper cold holding temperatures	☒	i	i	i	..	..
<b><i>This item has Notes. See Footnote 2 at end of questionnaire.</i></b>						
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	..	..
Highly Susceptible Populations (HSP)	IN	OUT	N/O	N/A	COS	REPEAT
26. Pasteurized foods used; prohibited foods not offered	i	i	i	☒	..	..



Inspector

\_\_\_\_\_  
Acknowledged Receipt : Michael Santos

Page 2 of 7

## Food Establishment Inspection Report

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, chemicals, and physical objects into foods.

IN = In compliance    OUT = not in compliance    COS - corrected on -site during inspection    REPEAT = repeat violation

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	i	..	..
34. Plant food properly cooked for hot holding	i	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	..	Ⓟ
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	N/O	N/A	OS	REPEAT
47. Food & non-food contact surfaces cleanable, properly designed, constructed & used	i	⊠	i	i	..	Ⓟ
48. Warewashing facilities: installed, maintained, & used; test strips	i	i	i	i	..	..



Inspector

\_\_\_\_\_  
Acknowledged Receipt : Michael Santos

## Food Establishment Inspection Report

Utensils, Equipment and Vending	IN	OUT	N/O	N/A	OS	REPEAT
---------------------------------	----	-----	-----	-----	----	--------

49. Non-food contact surfaces clean	i	⊠	i	i	"	p
-------------------------------------	---	---	---	---	---	---

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	i	"	"
--	---	---	---	---	---	---

54. Garbage & refuse properly disposed; facilities maintained	i	⊠	i	i	"	"
---	---	---	---	---	---	---

55. Physical facilities installed, maintained, & clean	i	⊠	i	i	"	"
--	---	---	---	---	---	---

56. Adequate ventilation & lighting; designated areas used	i	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	"	"
---	---	---	---	---	---	---

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	"	"
-----------	---	---	---	---	---	---

Discussion with Person-in-Charge
----------------------------------

  
Inspector

\_\_\_\_\_  
Acknowledged Receipt : Michael Santos

**Food Establishment Inspection Report**  
**Fail Notes Summary**

Code	Text
[Unlabeled section starting with 'Inspection Report Available' within 'Inspection Summary']	
8-304.11(K)	Previous inspection report not available onsite
<b>1. Person-in-charge present, demonstrates knowledge, and performs duties</b>	
2-101.11	Priority Foundation; Person in charge did not demonstrate knowledge of food safety practices or have an understanding of basic food personnel responsibilities.
<b>2. Certified Food Protection Manager</b>	
2-102.12(A)	Core; No certified food protection manager documentation onsite. PIC stated they had certifications but could not produce evidence.
<b>3. Management, food employee and conditional employee; knowledge, responsibilities and reporting</b>	
2-201.11(A),(C)	Priority; Employee Health Reporting Forms are not being used.
<b>5. Procedures for responding to vomiting and diarrheal events</b>	
2-501.11	Priority Foundation; No written cleanup plan or kit onsite.
<b>8. Hands clean &amp; properly washed</b>	
2-301.15	Priority Foundation; Hand washing sink being used to dispose of food products. Uncooked egg observed in bottom of sink.
<b>10. Adequate handwashing sinks properly supplied and accessible</b>	
5-205.11	Priority Foundation; Food observed in handwashing sink.
6-301.12	Priority Foundation; Handwashing sink did not have paper towels. COS
<b>13. Food in good condition, honestly presented, safe, &amp; unadulterated</b>	
3-101.11	Priority; Can of cream of mushroom soup dented in several spots. Seal compromised. Please discard. COS
<b>16. Food-contact surfaces: cleaned &amp; sanitized</b>	
4-501.112	Priority Foundation; Sanitizing solution too weak. Less than 50ppm. Please prepare to recommended ppm.
<b>21. Proper hot holding temperatures</b>	
This item has Notes. See Footnote 1 at end of questionnaire.	
<b>22. Proper cold holding temperatures</b>	
This item has Notes. See Footnote 2 at end of questionnaire.	
<b>23. Proper date marking and disposition</b>	
3-501.17(D)-(G)	Core; No date marking for cheese and deli meats in "True" refrigerator. Please add use by date on all prepared food items.
<b>25. Consumer advisory provided for raw / undercooked foods</b>	
3-603.11	Priority Foundation; Consumer advisory is on menu but cooked to order food items are not demarcated with an asterisk. Please add asterisk next to all cooked to order food items.
<b>38. Insects, rodents, &amp; animals not present</b>	
6-202.15	Core; Visible gap under back door. Please seal to deny pest entry.



Inspector

Acknowledged Receipt : Michael Santos

Page 5 of 7

## Food Establishment Inspection Report

Code	Text
<b>47. Food &amp; non-food contact surfaces cleanable, properly designed, constructed &amp; used</b>	
4-101.11(A)	Priority; Contact paper on shelving above stoves in disrepair. Paper is brittle and falling apart. Please replace with a smooth, nonporous, easily cleanable surface.
4-501.11	Core; Seals on cold holding unit in back room in disrepair. Repair or replace.
<b>49. Non-food contact surfaces clean</b>	
4-602.13	Core; Mold-like substance observed inside ice machine. Please clean and sanitize. Seals on cold holding unit in back are soiled. Please clean accumulation of debris. Knife rack soiled and shelving under wooden top prep station soiled with food debris. Ice buildup in cold holding units across from griddles. Please defrost.
<b>54. Garbage &amp; refuse properly disposed; facilities maintained</b>	
5-501.115	Core; Dust and debris on most surfaces in back room. Please clean. De-clutter and get rid of items not being used.
<b>55. Physical facilities installed, maintained, &amp; clean</b>	
6-501.12	Core; Back room - general cleanliness - please clean thoroughly.
<b>M1. Anti-choking procedures in food service establishment</b>	
[590.011(A)]	MA; No chokeSaver certification onsite.
<b>M2. Food allergy awareness</b>	
[590.011(C)]	MA; No food allergy poster posted in food prep area. Poster provided to PIC during inspection.



Inspector

\_\_\_\_\_  
Acknowledged Receipt : Michael Santos

Page 6 of 7

## Food Establishment Inspection Report

### **Footnote 1**

**Notes:**

dishwasher hot cycle - 161.4F

### **Footnote 2**

**Notes:**

eggs- refrigerator in back - 41F

mayonnaise - bain marie next to griddle - 38F

milk - refrigerator at end of bar - 37F



Inspector

\_\_\_\_\_  
Acknowledged Receipt : Michael Santos

Page 7 of 7