

Failed Closed IHH

State of Maine Health Inspection Report

Establishment Name WINNERS CIRCLE OTB	As Authorized by 22 MRSA § 2496	No. of Risk Factor/Intervention Violations	1	Date	7/2/2014
		No. of Repeat Risk factor / Intervention Violations	0	Time In	10:30 AM
		Score (optional)		Time Out	11:30 AM

License Expiry Date/EST. ID# 10/1/2014 / 19799	Address 4 MOLLISON WAY	City LEWISTON	Zip Code 04240	Telephone 207-784-6457
License Type MUN - EATING PLACE	Owner Name LRI INC	Purpose of Inspection Regular	License Posted	Risk Category

FOODBORNE ILLNESS RISK FACTORS AND PUBLIC HEALTH INTERVENTIONS

Circle designated compliance status (IN, OUT, N/O, N/A) for each numbered item
 IN=in compliance OUT=not in compliance N/O=not observed N/A=not applicable
 Mark "X" in appropriate box for COS and/or R
 COS=corrected on-site during inspection R=repeat violation


Compliance Status			COS	R	Compliance Status		COS	R
Supervision					Potentially Hazardous Food Time/Temperature			
1	IN	PIC present, demonstrates knowledge, and performs duties			16	IN	Proper cooking time & temperatures	
Employee Health					17	IN	Proper reheating procedures for hot holding	
2	IN	Management awareness; policy present			18	IN	Proper cooling time & temperatures	
3	IN	Proper use of reporting, restriction & exclusion			19	IN	Proper hot holding temperatures	
Good Hygienic Practices					20	IN	Proper cold holding temperatures	
4	IN	Proper eating, tasting, drinking, or tobacco use			21	IN	Proper date marking & disposition	
5	IN	No discharge from eyes, nose, and mouth			22	IN	Time as a public health control: procedures & record	
Preventing Contamination by Hands					Consumer Advisory			
6	IN	Hands clean & properly washed			23	IN	Consumer advisory provided for raw or undercooked foods	
7	IN	No bare hand contact with RTE foods or approved alternate method properly followed			Highly Susceptible Populations			
8	IN	Adequate handwashing facilities supplied & accessible			24	IN	Pasteurized foods used; prohibited foods not offered	
Approved Source					Chemical			
9	IN	Food obtained from approved source			25	IN	Food additives: approved & properly used	
10	IN	Food received at proper temperature			26	IN	Toxic substances properly identified, stored & used	
11	IN	Food in good condition, safe, & unadulterated			Conformance with Approved Procedures			
12	IN	Required records available: shellstock tags parasite destruction			27	IN	Compliance with variance, specialized process, & HACCP plan	
Protection from Contamination					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.			
13	IN	Food separated & protected						
14	OUT	Food-contact surfaces: cleaned and sanitized						
15	IN	Proper disposition of returned, previously served, reconditioned, & unsafe food						


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	Compliance Status		COS	R
Safe Food and Water					Proper Use of Utensils			
28	IN	Pasteurized eggs used where required			41	IN	In-use utensils: properly stored	
29	IN	Water & ice from approved source			42	IN	Utensils, equipment, & linens: properly stored, dried, & handled	
30	IN	Variance obtained for specialized processing methods			43	IN	Single-use & single-service articles: properly stored & used	
Food Temperature Control					44	IN	Gloves used properly	
31	IN	Proper cooling methods used; adequate equipment for temperature control			Utensils, Equipment and Vending			
32	IN	Plant food properly cooked for hot holding			45	X	Food & non-food contact surfaces cleanable, properly designed, constructed, & used	
33	IN	Approved thawing methods used			46	IN	Warewashing facilities: installed, maintained, & used; test strips	
34	IN	Thermometers provided and accurate			47	X	Non-food contact surfaces clean	
Food Identification					Physical Facilities			
35	IN	Food properly labeled; original container			48	IN	Hot & cold water available; adequate pressure	
Prevention of Food Contamination					49	IN	Plumbing installed; proper backflow devices	
36	IN	Insects, rodents, & animals not present			50	IN	Sewage & waste water properly disposed	
37	IN	Contamination prevented during food preparation, storage & display			51	IN	Toilet facilities: properly constructed, supplied, & cleaned	
38	IN	Personal cleanliness			52	IN	Garbage & refuse properly disposed; facilities maintained	
39	IN	Wiping cloths: properly used & stored			53	IN	Physical facilities installed, maintained, & clean	
40	IN	Washing fruits & vegetables			54	IN	Adequate ventilation & lighting; designated areas used	

Person in Charge (Signature)  Date: 7/2/2014

Health Inspector (Signature) 

Follow-up: YES NO Date of Follow-up:

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Temperature Observations

Location	Temperature	Notes
burger	36	
hot water	100	
salad dressing	38	
cooler	38	

Person in Charge (Signature)



Date: 7/2/2014

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Page 3 of 4

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City / State
LEWISTON

ME

Zip Code
04240

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

14: 4-601.11.(A): C: Equipment food-contact surfaces and utensils are not clean to sight and touch.

INSPECTOR NOTES: clean interior and exterior of ice machine

45: 4-204.16: N: Beverage tubing and/or cold plate improperly installed in contact with stored ice.

INSPECTOR NOTES: cold plate and tubing need to be covered or protected

45: 4-501.11: N: Equipment in disrepair.

INSPECTOR NOTES: paint floor cooler rusted

47: 4-602.13: N: Non-food contact surfaces are not cleaned at a frequency necessary to preclude accumulation of soil residues.

INSPECTOR NOTES: clean door seals sandwich bars

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Page 4 of 4

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Inspection Notes

Certified Food Protection Manager

- Unless directed otherwise, effective January 18, 2012 establishments have to have a Certified Food Protection Manager (CFPM) at each establishment per 10-144 CMR, Chapter 201, Section 2.
- A CFPM must be hired within 90 days of a new establishment opening or when the only CFPM leaves the employment of the establishment.
- For a list of CFPM courses and trainers go to: www.maine.gov/healthinspection/training.htm
- Upon completion of the CFPM course, please fax cover sheet and course certificate to (207) 287-3165. On the cover letter please send to the attention of Carol Gott and include your establishment name and establishment license number. Her phone number is 287-5675. You can also mail a copy, with establishment ID number, to her at 286 Water St, 3rd Floor, 11 State House Station, Augusta, ME 04333-0011.

Violation Correction Time Frame

- Critical Violations should be corrected on site, but, in any event, within 10 days. The licensee must contact the inspector when the critical violation has been addressed. Please send an e-mail to [sreny@lewistonmaine.gov or call Susan Reny at 513-3125 etx 3224].
- Non-critical violations must be corrected no later than 90 calendar days after the inspection. The Department may approve a compliance schedule that extends beyond the time limits if a written schedule of compliance is submitted by the Permit Holder and no health hazard exists or will result from allowing an extended schedule for compliance.
- Failure to satisfactorily correct these violations before the follow-up inspection may result in enforcement proceedings by the Department, which are outlined in Sections 7, 8, and 9 of 10-144 CMR Chapter 201 available at: www.maine.gov/dhhs/eng/el/rules.htm

Documentation Retention

- A copy of the most recent inspection report must be maintained at the establishment and be made available to the public upon request.
- A copy of all CFPM certificates must be maintained at the establishment.
- The establishment's current license must be displayed.

Jim Day is a CFPM (owner)

Person in Charge (Signature)



Date: 7/2/2014

Health Inspector (Signature)

