

Failed Closed IHH

State of Maine Health Inspection Report

| | | | | | |
|---|---------------------------------|-----------------------------------|---|----------|----------|
| Establishment Name WINNERS CIRCLE OTB | As Authorized by 22 MRSA § 2496 | Critical Violations | 2 | Date | 7/7/2017 |
| | | Non-Critical Violations | 2 | Time In | 11:00 AM |
| | | Certified Food Protection Manager | Y | Time Out | 11:45 AM |

| | | | | |
|---|---------------------------|----------------------------------|-----------------------|---------------------------|
| License Expiry Date/EST. ID# 10/1/2017 / 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 Yes | 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 |
|--|-----|--|--|-----|---|
| Supervision | | | | | |
| 1 | IN | PIC present, demonstrates knowledge, and performs duties | | | |
| Employee Health | | | | | |
| 2 | IN | Management awareness; policy present | | | |
| 3 | IN | Proper use of reporting, restriction & exclusion | | | |
| Good Hygienic Practices | | | | | |
| 4 | IN | Proper eating, tasting, drinking, or tobacco use | | | |
| 5 | IN | No discharge from eyes, nose, and mouth | | | |
| Preventing Contamination by Hands | | | | | |
| 6 | IN | Hands clean & properly washed | | | |
| 7 | IN | No bare hand contact with RTE foods or approved alternate method properly followed | | | |
| 8 | IN | Adequate handwashing facilities supplied & accessible | | | |
| Approved Source | | | | | |
| 9 | IN | Food obtained from approved source | | | |
| 10 | IN | Food received at proper temperature | | | |
| 11 | IN | Food in good condition, safe, & unadulterated | | | |
| 12 | IN | Required records available: shellstock tags parasite destruction | | | |
| Protection from Contamination | | | | | |
| 13 | IN | Food separated & protected | | | |
| 14 | OUT | Food-contact surfaces: cleaned and sanitized | | | |
| 15 | IN | Proper disposition of returned, previously served, reconditioned, & unsafe food | | | |

| Compliance Status | | | | COS | R |
|--|----|---|--|-----|---|
| Potentially Hazardous Food Time/Temperature | | | | | |
| 16 | IN | Proper cooking time & temperatures | | | |
| 17 | IN | Proper reheating procedures for hot holding | | | |
| 18 | IN | Proper cooling time & temperatures | | | |
| 19 | IN | Proper hot holding temperatures | | | |
| 20 | IN | Proper cold holding temperatures | | | |
| 21 | IN | Proper date marking & disposition | | | |
| 22 | IN | Time as a public health control: procedures & record | | | |
| Consumer Advisory | | | | | |
| 23 | IN | Consumer advisory provided for raw or undercooked foods | | | |
| Highly Susceptible Populations | | | | | |
| 24 | IN | Pasteurized foods used; prohibited foods not offered | | | |
| Chemical | | | | | |
| 25 | IN | Food additives: approved & properly used | | | |
| 26 | IN | Toxic substances properly identified, stored & used | | | |
| Conformance with Approved Procedures | | | | | |
| 27 | IN | Compliance with variance, specialized process, & HACCP plan | | | |

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.

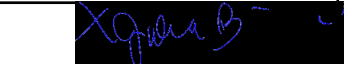
GOOD RETAIL PRACTICES


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 |
|---|----|---|--|-----|---|
| Safe Food and Water | | | | | |
| 28 | IN | Pasteurized eggs used where required | | | |
| 29 | IN | Water & ice from approved source | | | |
| 30 | IN | Variance obtained for specialized processing methods | | | |
| Food Temperature Control | | | | | |
| 31 | IN | Proper cooling methods used; adequate equipment for temperature control | | | |
| 32 | IN | Plant food properly cooked for hot holding | | | |
| 33 | IN | Approved thawing methods used | | | |
| 34 | IN | Thermometers provided and accurate | | | |
| Food Identification | | | | | |
| 35 | IN | Food properly labeled; original container | | | |
| Prevention of Food Contamination | | | | | |
| 36 | IN | Insects, rodents, & animals not present | | | |
| 37 | IN | Contamination prevented during food preparation, storage & display | | | |
| 38 | IN | Personal cleanliness | | | |
| 39 | IN | Wiping cloths: properly used & stored | | | |
| 40 | IN | Washing fruits & vegetables | | | |

| Compliance Status | | | | COS | R |
|--|----|--|--|-----|---|
| Proper Use of Utensils | | | | | |
| 41 | IN | In-use utensils: properly stored | | | |
| 42 | IN | Utensils, equipment, & linens: properly stored, dried, & handled | | | |
| 43 | IN | Single-use & single-service articles: properly stored & used | | | |
| 44 | IN | Gloves used properly | | | |
| Utensils, Equipment and Vending | | | | | |
| 45 | IN | Food & non-food contact surfaces cleanable, properly designed, constructed, & used | | | |
| 46 | X | Warewashing facilities: installed, maintained, & used; test strips | | | x |
| 47 | X | Non-food contact surfaces clean | | | x |
| Physical Facilities | | | | | |
| 48 | IN | Hot & cold water available; adequate pressure | | | |
| 49 | IN | Plumbing installed; proper backflow devices | | | |
| 50 | IN | Sewage & waste water properly disposed | | | |
| 51 | IN | Toilet facilities: properly constructed, supplied, & cleaned | | | |
| 52 | IN | Garbage & refuse properly disposed; facilities maintained | | | |
| 53 | IN | Physical facilities installed, maintained, & clean | | | |
| 54 | IN | Adequate ventilation & lighting; designated areas used | | | |

Person in Charge (Signature)  Date: 7/7/2017

Health Inspector (Signature)  Follow-up: YES NO Date of Follow-up:

State of Maine Health Inspection Report

| | | | | |
|--|----------------------------------|--|--------------------------|----------------------------------|
| Establishment Name WINNERS CIRCLE OTB | | <i>As Authorized by 22 MRSA § 2496</i> | | Date <u>7/7/2017</u> |
| License Expiry Date/EST. ID# 10/1/2017 / 19799 | Address 4 MOLLISON WAY | City / State LEWISTON / ME | Zip Code 04240 | Telephone 207-784-6457 |

Temperature Observations

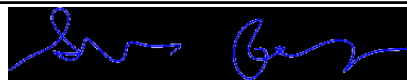
| Location | Temperature | Notes |
|-----------|-------------|-------|
| cooler | 37 | |
| beer | 38 | |
| hot water | 110 plus | |

Person in Charge (Signature)



Date: 7/7/2017

Health Inspector (Signature)



State of Maine Health Inspection Report

Page 3 of 5

Establishment Name

WINNERS CIRCLE OTB

Date 7/7/2017

License Expiry Date/EST. ID#
10/1/2017 / 19799

Address
4 MOLLISON WAY

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 ice machine

14: 4-702.11: C: Food contact surfaces not sanitized before use after cleaning.

INSPECTOR NOTES: no sanitizer on site-purchase sanitizer

46: 4-302.14: N: No chemical test kit available.

INSPECTOR NOTES: needed

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 freezer door seals

Person in Charge (Signature)



Date: 7/7/2017

Health Inspector (Signature)



State of Maine Health Inspection Report

Page 4 of 5

Establishment Name

WINNERS CIRCLE OTB

Date 7/7/2017

License Expiry Date/EST. ID#
10/1/2017 /19799

Address
4 MOLLISON WAY

City / State
LEWISTON

ME

Zip Code
04240

Inspection Notes

RED FOLDER-EMPLOYEE HEALTH POLICY

Employee Health Policy left and explained the policy with the PIC. Please retain information as you will be asked next year during your inspection to provide the employee Health Policy information which was left with the PIC.

Certified Food Protection Manager

Unless directed otherwise, all Eating Establishments are required to submit a copy of their Certified Food Protection Manager (CFPM) certificate. A CFPM must be hired within 90 days of a new eating establishment opening or when a CFPM leaves employment. For a list of CFPM courses and trainers go to <http://www.maine.gov/healthinspection/training.htm>

Please provide a copy of this certification(s) to your inspector [Susan Reny] by emailing to [sreny@lewistonmaine.gov] or faxing to 207-795-5071. A copy may also be sent to Carol Gott, Health Inspection Program, 286 Water St. 3rd Floor, Augusta, ME 04333 or carol.gott@maine.gov.

Please include the name of your establishment and the establishment ID# with your certification(s).

2013 Maine Food Code Adoption

The Maine Food Code was adopted in October of 2013. Please refer to our website for a copy, <http://www.maine.gov/healthinspection>. Following are a few of the major changes:

- No Bare Hand Contact with Ready-To-Eat Food. Handlers are required to use gloves, utensils, deli papers, etc., to avoid bare hand contact with ready-to-eat food;
- Establishments must have clean-up procedures for employees to follow following vomiting and diarrheal events;
- Responsibilities of the person in charge for ill employees (exclusions and restrictions); and,
- Date marking of Ready-to-eat potentially hazardous foods.

Violation Correction Timeframe

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 at 207-(513-3125 Ext 3224) or email (sreny@lewistonmaine.gov). Non-critical violations must be corrected within 30 days. Failure to satisfactorily correct these violations before the follow-up inspection may result in enforcement proceedings by the Department to include fines and penalties, which are outlined in Sections 7, 8 and 9 of the Rules Relating to the Administration and Enforcement of Establishments Licensed by the Health Inspection Program available at <http://www.maine.gov/healthinspection>. License renewals can be denied if violations are not corrected within the noted timeframes.

C= Critical violation and NC= Non-critical violation

“Critical violation” means a provision of the Food Code that, if in non-compliance, is more likely than other violations to contribute to food contamination, illness or environmental health hazard.

Additional Inspection Fee

License fees provide for two inspections per year. When additional inspections are required, the Department may charge an additional \$100 fee to cover the costs of each additional inspection or visit.

Document Retention/Posting

Pursuant to the Maine Food Code, the establishment's current license must be displayed. In addition, a sign or placard must be posted in a conspicuous area notifying consumers that a copy of the most recent inspection report is available upon request. CFPM certificates must be posted in a conspicuous area and must be available to the Department upon request.

Anthony Scherrer id # 12751821 exp 9/2/2020

Person in Charge (Signature)



Date: 7/7/2017

Health Inspector (Signature)



State of Maine Health Inspection Report

Page 5 of 5

Establishment Name

WINNERS CIRCLE OTB

Date 7/7/2017

License Expiry Date/EST. ID#
10/1/2017 / 19799

Address
4 MOLLISON WAY

City / State
LEWISTON

ME

Zip Code
04240

Inspection Notes

Person in Charge (Signature)



Date: 7/7/2017

Health Inspector (Signature)



