037-H014 City of Portland Health Inspection Report Fe3 -00 No. of Risk Factor/Intervention Violations Date Establishment Name No. of Repeat Risk Factor/Intervention Violations Time In Score (optional) Time Out City/State Zip Code Telephone Address License/Est. ID# 47 OAK Owner Name Joely Sparks
Brechs Bell Purpose of Inspection License Posted Est. Type **Risk Category** AnnuAL √Yes []No FOODBORNE ILLNESS RISK FACTORS AND PUBLIC HEALTH INTERVENTIONS Circle designated compliance status (IN, OUT, N/O, N/A) for each numbered item Mark "X" in appropriate box for COS and/or R COS=corrected on-site during inspection R=repeat violation IN= in compliance OUT=not in compliance N/O=not observed N/A=not applicable COSR COSR Compliance Status Compliance Status Potentially Hazardous Food Time/Temperature Supervision IN OUTN/AMO Proper cooking time & temperatures PIC present, demonstrates knowledge, and IN OUT 5 17 IN OUTN/A(NO) Proper reheating procedures for hot holding performs duties 5 18 IN OUT N/A N/O Proper cooling time & temperature 5 19 IN OUTN/A N/O Proper hot holding temperatures **Employee Health** Management awareness; policy present IN OUT N/A Proper cold holding temperatures 5 20 (N) OUT IN OUT Proper use of reporting, restriction & Exclusion 5 3 5 21 IN OUTN/A MO Proper date marking & disposition Good Hygienic Practices 5 22 IN OUTN/A WO Time as a public health control: procedures N/O Proper eating, tasting, drinking, or tobacco use IN OUT & record NO No discharge from eyes, nose, and mouth IN OUT Consumer Advisory Preventing Contamination by Hands Consumer advisory provided for raw or 5|23| IN OUT IN OUT N/O Hands clean & properly washed undercooked foods IN OUTN/A MO No bare hand contact with RTE foods or Highly Susceptible Populations approved alternate method properly followed N/A Pasteurized foods used; prohibited foods not 5 24 IN OUT IN QUIT Adequate handwashing facilities supplied & offered accessible Chemical **Approved Source** N/A Food additives: approved & properly used TUQ NIV 5|25| IN OUT Food obtained form approved source Toxic substances properly identified, stored, 5 10 IN OUT N/A N/O Food received at proper temperature 5 26 IN OUT & used Food in good condition, safe, & unadulterated 5 11 (IN OUT Conformance with Approved Procedures 1 12 IN OUTN/A N/O Required records available: shellstock IN OUT N/A Compliance with variance, specialized tags, parasite destruction process, & HACCP plan **Protection from Contamination** 2 13 (N) OUT N/A | Food separated & protected Risk factors are improper practices or procedures identified as the most N/A Food-contact surfaces: cleaned & sanitized 214 IN OUT prevalent contributing factors of foodborne illness or injury. Public Health Proper disposition of returned, previously **MOUT** Interventions are control measures to prevent foodborne illness or injury. 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 COSR COSR **Proper Use of Utensils** Safe Food and Water Pasteurized eggs used where required In-use utensils: properly stored 5 28 2 42 Utensils, equipment & linens: properly stored, dried & handled 5 29 Water & ice from approved source 2 43 Single-use & single-service articles: properly stored & used Variance obtained for specialized processing 30 **Food Temperature Control** 44 Gloves used properly Utensil, Equipment and Vending Proper cooling methods used; adequate equipment for 31 2 45 Food & non-food contact surfaces cleanable, properly temperature control designed, constructed, & used Plant food properly cooked for hot holding 5 32 Warewashing facilities: installed, maintained, & used; test strips Approved thawing methods used 46 33 1 Non-food contact surfaces clean 47 34 Thermometers provided & accurate Food Identification **Physical Facilities** Hot & cold water available; adequate pressure 4 48 Food properly labeled; original container 1 35 5 49 Plumbing installed; proper backflow devices **Prevention of Food Contamination** 5 50 Sewage & waste water properly disposed Insects, rodents, & animals not present 36 Toilet facilities: properly constructed, supplied, & cleaned 2 51 Contamination prevented during food preparation, storage & display 2 37 2 52 Garbage & refuse properly disposed; facilities maintained 5 38 Personal cleanliness 1 53 Physical facilities installed, maintained, & clean Wiping cloths: properly used & stored 39 Adequate ventilation & lighting; designated areas used Washing fruits & vegetables 40 Person in Charge (Signature) Follow-up: YES NO (circle one) Follow-up Date: Health Inspector (Signature)