## RETAIL FOOD FACILITY INSPECTION REPORT

| RADNOR TOWNHSIP       |                                 |                |                                    | # Risk Factor Violations        | DATE          | 05/16/17 |
|-----------------------|---------------------------------|----------------|------------------------------------|---------------------------------|---------------|----------|
| 301 IVEN AV           | ENUE                            |                |                                    | # Repeat Risk Factor Violations | TIME IN       | 1:50PM   |
| WAYNE, PA 19087       |                                 |                |                                    | Overall Compliance Status       | TIME OUT      |          |
| Food Facility Address |                                 |                | Address                            | City/State                      | Zip           | Phone #  |
|                       | HARVEST LLC 555 E LANCASTER AVE |                | 555 E LANCASTER AVE                | WAYNE, PA                       |               |          |
| Registration#         |                                 |                | Purpose of Inspection (choose one) | License Type                    | Risk Category |          |
| FE00001319            |                                 | 9 DAVID SCHORN |                                    | Routine                         | Retail        | RETAIL   |

## FOODBORNE ILLNESS RISK FACTORS AND PUBLIC HEALTH INTERVENTIONS

Risk Factors are important 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.

|                                   |     | Demonstration of Knowledge   |     |    |  | Protection from Contamination   |     |  |
|-----------------------------------|-----|--|-----|----|--|---|-----|--|
|                                   | IN  | Person in charge, demonstrates knowledge & performs duties                                       |     | 14 | IN                                       | Food separated & protected  |     |  |
| Employee Health                   |     |  |     | 15 | IN                                       | Food contact surfaces: cleaned and sanitized                                      | N/A |  |
|                                   | IN  | Management, food employee & conditional employee; knowledge, responsibilities & reporting        | N/A | 16 | IN                                       | Proper disposition of returned, previously served, reconditioned and unsafe food. | N/A |  |
|                                   | INI | Proper use of reporting; restriction & exclusion   | N/A |    |  | Time/Temperature Control for Safety   |     |  |
|                                   | IN  |  |     | 17 | Proper cooking time & temperature IN     |   | N/A |  |
|                                   | IN  | Procedures for responding to vomiting & diarrheal events   | N/A | 18 |  | Proper reheating procedures for hot holding                                       |     |  |
|                                   |     | Good Hygienic Practices  |     |    | IN                                       |   | N/A |  |
| i                                 | IN  | Proper eating, tasting, drinking or tobacco use N/A  |     | 19 | IN                                       | Proper cooling time & temperature   | N/A |  |
| i                                 | IN  | No discharge from eyes, nose & mouth   | N/A | 20 | IN                                       | Proper hot holding & temperatures   | N/A |  |
| Preventing Contamination by Hands |     |  |     |    | 21 Proper cold holding & temperatures IN |   | N/A |  |
|                                   | OUT | Hands clean & property washed Put sign in rest room for employees to wash hands                  | N/A | 22 | IN                                       | Proper data marking & disposition   | N/A |  |
|                                   | IN  | No bare hand contact with RTE foods or pre-approved alternate method properly followed           | N/A | 23 | IN                                       | Time as a public health control: procedures & record                              | N/A |  |
| ľ                                 | OUT | Adequate handwashing sinks properly supplied and accessible Keep sinks stocked with paper towels | С   |    |  | Consumer Advisory   |     |  |
|                                   |     | Approved Source  |     | 24 | IN                                       | Consumer advisory provided for raw/undercooked foods                              | N/A |  |
| .0                                | IN  | Food obtained from approved source N N/A   |     |    | Highly Susceptible Population            |   |     |  |
| 1                                 | IN  | Food received at proper temperature  | N/A | 25 | IN                                       | Pasteurized food used; prohibited foods not offered                               | N/A |  |
| 2                                 | IN  | Food in good condition, safe & unadulterated   | N/A |    |  | Food/Color Additives & Toxic Substances   |     |  |
| 3                                 |     | Required records available, shellstock tags, parasite  | 1   | 26 | IN                                       | Food/Color additives: approved & properly used                                    | N/A |  |
|                                   | IN  |  | N/A | 27 | IN                                       | Toxic substances properly identified, stored & used                               | N/  |  |
|                                   |     |  |     |    |  | Conformance with Approved Procedures  |     |  |
|                                   | R   | teset Form   |     | 28 | IN                                       | Compliance with variance/specialized process/HACCP                                | N   |  |

## **GOOD RETAIL PRACTICES**

Good Retail Practices are preventative measures to control the addition of pathogens, chemicals, and physical objects into food.

| Safe Food & Water |     |   |     |    |      | Proper Use of Utensils  |     |  |  |  |  |
|-------------------|-----|---|-----|----|------|---|-----|--|--|--|--|
| 29                | IN  | Pasteurized eggs used where required  | N/A | 42 | IN . | in-Use utensils; properly stored  | N/A |  |  |  |  |
| 30                | IN  | Water & Ice from approved source  | N/A | 43 | IN   | Utensils, equipment & linens; properly stored, dried & handled                                  | N/A |  |  |  |  |
| 31                | IN  | Variance obtained for specialized processing methods  N/A                               |     | 44 | IN   | Single-use/single-service articles: properly stored & used                                      | N/A |  |  |  |  |
|                   |     | Food Temperature Control  |     |    | IN   | Gloves used properly  |     |  |  |  |  |
| 32                | IN  | Proper cooling methods used; adequate equipment for temperature control                 |     |    | in.  | Utensils, Equipment & Vending   |     |  |  |  |  |
| 33                | IN  | Plant food properly cooked for hot holding  |     | 46 | IN   | ood & non-food contact surfaces cleanable, properly designed, constructed, & sed                |     |  |  |  |  |
| 34                | IN  | Approved thawing methods used   |     | 47 | OUT  | Warewashing facilities; installed, maintained & used; test Test strips for sanitizer being used | C   |  |  |  |  |
| 35                | OUT | Thermometers provided & accurate  Need thermometer in undercounter cooler               |     | 48 | OUT  | Non-food contact surfaces clean Clean under bar   | N/A |  |  |  |  |
|                   |     | Food Identification   |     |    |      | Physical Facilities   |     |  |  |  |  |
| 36                | IN  | Food properly labeled; original container   | N/A | 49 | оит  | Hot & cold water available: adequate pressure Service hot water in employee rest rooms          | N/A |  |  |  |  |
|                   |     | Prevention of Food Contamination  |     | 50 | IN   | Plumbing installed: installed, maintained & used; test  | N/A |  |  |  |  |
| 37                | IN  | Insects, rodents, & animals not present   | N/A | 51 | IN   | Sewage & waste water properly disposed  | N/A |  |  |  |  |
| 38                | IN  | Contamination prevented during food preparation, storage & display                      | N/A | 52 | IN   | Toilet facilities; properly constructed, supplied, cleaned                                      | N/A |  |  |  |  |
| 39                | оит | Personal cleanliness N/A Hair restraints and beard restraints for all food prep workers |     | 53 | IN   | Garbage & refuse properly disposed: facilities maintained                                       | N/A |  |  |  |  |
| 40                | IN  | Wipe clothes; properly used & stored N/A  |     | 54 | IN   | Physical facilities installed, maintained & clean   | N/A |  |  |  |  |
| 41                | IN  | Washing fruits & vegetables   | N/A | 55 | IN   | Adequate ventilation & lighting: designated areas used  | N/A |  |  |  |  |

FOOD EMPLOYEE CERTIFICATION Compliance with PA Food Employee Certification Act (3Pa.CSASS§§6501-6510)

|    | CERTIFIED FOOD EMPLOYEE |   |     |    |    | CERTIFICATE  |     |  |  |  |
|----|-------------------------|---|-----|----|----|--|-----|--|--|--|
| 56 | IN                      | Certified Food Employee employed; acts as PIC; accessible | N/A | 57 | IN | Certified Food manager certificate: valid and properly displayed | N/A |  |  |  |

 ${\rm IN}={\rm in}$  compliance,  ${\rm OUT}={\rm not}$  in compliance,  ${\rm N/O}={\rm not}$  observed,  ${\rm N/A}={\rm not}$  applicable

C = corrected on site, R = repeated

Marie Carbonarn

| RADNOR T                  | OWNHSIP              |                  |  |                                 | # Risk                    | Factor Violations  | DATE   | 05/16/17      |  |  |
|---------------------------|----------------------|------------------|--|---------------------------------|---------------------------|--|--|---------------|--|--|
| 301 IVEN A                |                      |                  |  | # Repeat Risk Factor Violations |                           | TIME IN  | 1:50PM   |               |  |  |
| WAYNE, PA 19087           |                      |                  |  |                                 | Overall Compliance Status |  | TIME OUT   |               |  |  |
| Food Facility Address     |                      |                  |  |                                 | City/s                    | itate  | Zîp  | Phone #       |  |  |
| HARVEST LLC 555 E LANCAST |                      |                  | TER AVE  |                                 | WAYNE, PA                 |  |  |               |  |  |
| Registration#             | Own                  | er               |  |                                 | Purpo                     | se of Inspection (choose one)  | License Type   | Risk Category |  |  |
| FE000                     |                      | DAVID SCHORN     |  |                                 | Routine                   | Retail   | RETAIL   |               |  |  |
|                           |                      |                  |  | TEMPE                           | RATURE                    |  |  |               |  |  |
|                           | ITEM                 | /LOCATION        |  | TEM                             | IP                        | ITEM/L   | ITEM/LOCATION  |               |  |  |
| ONIONS                    |                      |                  |  | 39                              |                           | MUSHROOM SOUP  |  | 162           |  |  |
| CARROTS                   |                      |                  |  | 40                              |                           | BEEF   |  | 135           |  |  |
| SALMON                    |                      |                  |  | 40                              |                           | RICE   |  | 136           |  |  |
| ICE CREAM                 | COOLER               |                  |  | 39                              |                           |  |  |               |  |  |
| BREAD COO                 | DLER                 |                  |  | 8                               |                           |  |  |               |  |  |
| WALK IN                   |                      |                  | migration and an entire section of the section of t | 38                              |                           |  |  |               |  |  |
|                           |                      | and the second   |  |                                 |                           |  |  |               |  |  |
|                           |                      |                  |  | WARE                            | WASHIN                    | IG FACILITIES  |  |               |  |  |
|                           |                      |                  |  |                                 |                           | SANITIZER  |  | PPM           |  |  |
| 3 Bay Sink                |                      |                  |  |                                 |                           | QUATS  |  | 150           |  |  |
| 3 Bay Sink                |                      | entre contractor |  |                                 |                           |  |  |               |  |  |
| Dishwashe                 | Dishwasher           |                  |  |                                 |                           | CHLORINE   |  | 50            |  |  |
| Wiping Co                 | ths                  |                  |  |                                 |                           | WET CLOTH  | 200, 300   |               |  |  |
|                           |                      |                  | OBS  | ERVATION                        | IS & CO                   | DRRECTIVE ACTIONS  |  |               |  |  |
| ITEM#                     | No.                  |                  |  |                                 | VIO                       | LATION TEXT  |  |               |  |  |
| ****                      | For future, notify F | Radnor Health I  | Department of all sewage b   | ackups.                         |                           |  |  |               |  |  |
| ****                      | Until hot water is s | serviced in emp  | loyee restrooms, use patro   | in restrooms.                   |                           |  |  |               |  |  |
|                           |                      |                  |  |                                 |                           |  |  | ,             |  |  |
| ****                      | Correct violations   | within 24 hours  | with the exception of plum   | ibing, which sho                | ould be cor               | rected within 2 weeks.   |  |               |  |  |
|                           |                      |                  |  |                                 |                           |  |  |               |  |  |
|                           |                      |                  |  |                                 |                           |  |  |               |  |  |
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|                           |                      |                  |  |                                 |                           |  |  |               |  |  |
|                           |                      |                  |  |                                 |                           |  |  | P             |  |  |
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|                           | 1                    |                  |  |                                 |                           |  |  |               |  |  |

Follow-up to be completed on sanitarian copy only!

Warning Letter Requested

**Prosecution Requested** 

Follow-up Date