

# CITY OF TITUSVILLE, PA FOOD ESTABLISHMENT INSPECTION REPORT

<b>CITY OF TITUSVILLE DEPARTMENT OF HEALTH</b>		No. of Risk Factor/Interventions Violations	<b>Date</b> 5/30/19
		No. of Repeat Risk Factor/Intervention/Violations	Current Expiration <b>5/17/2019</b>
Establishment <b>Scoops Ice Cream</b>		Location <b>113 S Brown St</b>	
License / Permit #	Contact/Permit Holder <b>Thomas Jones</b>	Purpose of Inspection Routine Follow-up	Est Type FS RS
		Risk Category High Medium Low	

## 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  
**IN** = in compliance **OUT** = not in compliance **N/O** = not observed **N/A** = not applicable **COS** = corrected on-site during inspection **R** = repeat violation

Compliance Status		COS	R	Compliance Status		COS	R
<b>Demonstration of Knowledge</b>				<b>Potentially Hazardous Food Time/Temperature</b>			
<b>1</b>	IN OUT	Certification by accredited program, compliance with Code, or correct responses		<b>16</b>	IN OUT N/A N/O	Proper cooking time & temperatures	
				<b>17</b>	IN OUT N/A N/O	Proper reheating proc for hot holding	
<b>Employee Health</b>				<b>18</b>	IN OUT N/A N/O	Proper cooling time & temperatures	
<b>2</b>	IN OUT	Management awareness; policy present		<b>19</b>	IN OUT N/A N/O	Proper hot holding temperatures	
<b>3</b>	IN OUT	Proper use of reporting, restriction & exclusion		<b>20</b>	IN OUT N/A	Proper cold holding temperatures	
<b>Good Hygienic Practices</b>				<b>21</b>	IN OUT N/A N/O	Proper date marking & disposition	
<b>4</b>	IN OUT N/O	Proper eating, tasting, drinking, or tobacco use		<b>22</b>	IN OUT N/A N/O	Time as public health control; proc & rec	
<b>5</b>	IN OUT N/O	No discharge from eyes, nose, and mouth					
<b>Preventing Contamination by Hands</b>				<b>Consumer Advisory</b>			
<b>6</b>	IN OUT N/O	Hands clean & properly washed		<b>23</b>	IN OUT N/A	Consumer advisory provided for raw or undercooked foods	
<b>7</b>	IN OUT N/A N/O	No bare hand contact with RTE foods or approved alternate method properly followed		<b>Highly Susceptible Populations</b>			
<b>8</b>	IN OUT	Adequate handwashing facilities supplied & accessible		<b>24</b>	IN OUT N/A	Pasteurized foods used; prohibited foods not offered	
<b>Approved Sources</b>				<b>Chemical</b>			
<b>9</b>	IN OUT	Food obtained from approved source		<b>25</b>	IN OUT N/A	Food additives: approved & properly used	
<b>10</b>	IN OUT N/A N/O	Food received at proper temperature		<b>26</b>	IN OUT N/A	Toxic substances properly identified, stored & used	
<b>11</b>	IN OUT	Food in good condition, safe & unadulterated		<b>Conformance with Approved Procedures</b>			
<b>12</b>	IN OUT N/A N/O	Required records available: shelf stock tags, parasite destruction		<b>27</b>	IN OUT N/A	Compliance with variance, specialized process, & HACCP plan	
<b>Protection from contamination</b>				<b>Risk factors</b> 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.			
<b>13</b>	IN OUT N/A	Food separated & protected					
<b>14</b>	IN <u>OUT</u> N/A	Food-contact surfaces: cleaned & sanitized					
<b>15</b>	IN OUT	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

		COS	R			COS	R
<b>Safe Food and Water</b>				<b>Proper Use of Utensils</b>			
<b>28</b>		Pasteurized eggs used where required		<b>41</b>		In-use utensils: properly stored	
<b>29</b>		Water & ice from approved source		<b>42</b>		Utensils, equip & linens: properly stored, dried & handled	
<b>30</b>		Variance obtained for specialized processing methods		<b>43</b>		Single-use & single-service articles: properly stored & used	
<b>Food Temperature Control</b>				<b>44</b>		Gloves used properly	
<b>31</b>		Proper cooling methods used; adequate equipment for temperature control		<b>Utensils, Equipment and Vending</b>			
<b>32</b>		Plant food properly cooled for hot holding		<b>45</b>		Food & non-food contact surfaces cleanable, properly designed, constructed & used	
<b>33</b>		Approved thawing methods used		<b>46</b>	X	Warewashing facilities: installed, maintained, used: test strips	
<b>34</b>		Thermometers provided & accurate		<b>47</b>		Non-food contact surfaces clean	
<b>Food Identification</b>				<b>Physical Facilities</b>			
<b>35</b>		Food properly labeled; original container		<b>48</b>		Hot & cold water available; adequate pressure	
<b>Prevention of Food Contamination</b>				<b>49</b>		Plumbing installed; proper backflow devices	
<b>36</b>		Insects, rodents & animals not present; no unauthorized persons		<b>50</b>		Sewage & waste water properly disposed	
<b>37</b>		Contamination prevented during prep, storage & display		<b>51</b>		Toilet facilities: properly constructed, supplied & cleaned	
<b>38</b>		Personal cleanliness		<b>52</b>		Garbage & refuse properly disposed; facilities maintained	
<b>39</b>		Wiping cloths: properly used & stored		<b>53</b>		Physical facilities installed, maintained & clean	
<b>40</b>		Washing fruits & vegetables		<b>54</b>		Adequate ventilator & lighting: designated areas used	

Person in Charge (Signature) \_\_\_\_\_

Follow-up: YES  NO  (Circle one)

Inspector (Signature) \_\_\_\_\_

Follow-up Date: \_\_\_\_\_

APPROVED  NEW

RE-NEW

RE-INSPECT

