

**MENASHA HEALTH DEPARTMENT - RESTAURANT / RETAIL FOOD SERVICE INSPECTION REPORT**

Business Name <b>Chef Fresh Pizza</b>		Business Address 204 Manitowoc Street		County <b>Winnebago</b>		ID # <b>22-24050</b>	
Legal Licensee <b>Chef Fresh Pizza</b>		Mailing Address (Licensee) 1841 Northridge Ct		Telephone # (920 ) 725-9322			
Date of inspection 1/2/13		Bare Hand Contact Plan in Place <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Type of Establishment <input type="checkbox"/> Restaurant <input checked="" type="checkbox"/> Retail		Is operator Certified <input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> pending <input type="checkbox"/> N/A	
<b>inspection Type</b> <input type="checkbox"/> pre-inspection <input checked="" type="checkbox"/> routine inspection <input type="checkbox"/> Re-inspection <input type="checkbox"/> Complaint <input type="checkbox"/> Downtime <input type="checkbox"/> Non inspection visit				<b>Action Taken</b> <input checked="" type="checkbox"/> Operational <input type="checkbox"/> Conditional Permit 30 days <input type="checkbox"/> Withhold Permit <input type="checkbox"/> License suspended <input type="checkbox"/> License revoked <input type="checkbox"/> Other			
<b>Person in Charge</b> <b>Deanna Krieglstein</b>				<b>CFM # and expiration</b> CFM #                      expiration date			

FOODBORNE ILLNESS RISK FACTORS	
Circle designated compliance status for each item <b>IN</b> -in compliance <b>OUT</b> – out of compliance <b>N/O</b> – not observed <b>N/A</b> – not applicable	Mark an <b>X</b> in appropriate box for <b>COS</b> and/or <b>R</b> <b>COS</b> – corrected on site during inspection <b>R</b> - repeat violation

COMPLIANCE STATUS			COS	R	COMPLIANCE STATUS			COS	R
<b>DEMONSTRATION OF KNOWLEDGE</b>					<b>POTENTIALLY HAZARDOUS FOOD TEMPERATURE</b>				
1A	OUT	Certified food manager, duties	<input type="checkbox"/>	<input type="checkbox"/>	16	NA	Proper cooking time and temperature	<input type="checkbox"/>	<input type="checkbox"/>
1B	IN	Person in charge, ID knowledgeable, duties and responsibilities	<input type="checkbox"/>	<input type="checkbox"/>	17	NA	Proper re-heating procedures for hot holding	<input type="checkbox"/>	<input type="checkbox"/>
<b>EMPLOYEE HEALTH</b>					18	NO	Proper cooling time and temperature	<input type="checkbox"/>	<input type="checkbox"/>
2	IN	Management awareness, policy present	<input type="checkbox"/>	<input type="checkbox"/>	19	NA	Proper hot holding temperatures	<input type="checkbox"/>	<input type="checkbox"/>
3	IN	Proper use of reporting, restriction and exclusion	<input type="checkbox"/>	<input type="checkbox"/>	20	IN	Proper cold holding temperatures	<input type="checkbox"/>	<input type="checkbox"/>
<b>GOOD HYGENIC PRATICES</b>					21	IN	Proper date marking and disposition	<input type="checkbox"/>	<input type="checkbox"/>
4	IN	Proper eating, tasting, drinking	<input type="checkbox"/>	<input type="checkbox"/>	22	NA	Time as a public health control; procedures and record	<input type="checkbox"/>	<input type="checkbox"/>
5	IN	No discharge from eyes, nose and mouth	<input type="checkbox"/>	<input type="checkbox"/>	<b>CONSUMER ADVISORY</b>				
<b>PREVENTING CONTAMINATION FROM HANDS</b>					23	IN	Consumer advisory supplied	<input type="checkbox"/>	<input type="checkbox"/>
6	IN	Hands cleaned and properly washed	<input type="checkbox"/>	<input type="checkbox"/>	<b>HIGHLY SUSEPTABLE POPULATIONS</b>				
7	IN	No bare hand contact or using approved plan	<input type="checkbox"/>	<input type="checkbox"/>	24	NA	Pasteurized foods used; prohibited foods not offered	<input type="checkbox"/>	<input type="checkbox"/>
8	IN	Adequate hand washing facilities supplied and accessible	<input type="checkbox"/>	<input type="checkbox"/>	<b>CHEMICAL</b>				
<b>APPROVED SOURCE</b>					25	NA	Food additives approved and properly use	<input type="checkbox"/>	<input type="checkbox"/>
9	IN	Food obtained from approved source	<input type="checkbox"/>	<input type="checkbox"/>	26	IN	Toxic substances properly identified, stored, used	<input type="checkbox"/>	<input type="checkbox"/>
10	IN	Food received at proper temperature	<input type="checkbox"/>	<input type="checkbox"/>	<b>CONFORMANCE WITH APPROVED PROCEDURES</b>				
11	IN	Food in good condition, safe, unadulterated	<input type="checkbox"/>	<input type="checkbox"/>	27	NA	Compliance with variance, specialized process, HACCP plan	<input type="checkbox"/>	<input type="checkbox"/>
12	NA	Records available, shell stock tags, parasite destruction	<input type="checkbox"/>	<input type="checkbox"/>	<b>Risk Factors:</b> 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.  Risk factor violations should be corrected on site during the inspection unless there is some reason that correction cannot be immediately made.				
<b>PROTECTION FROM CONTAMINATION</b>									
13	IN	Food separated and protected	<input type="checkbox"/>	<input type="checkbox"/>					
14	OUT	Food contact surfaces cleaned and sanitized	<input type="checkbox"/>	<input type="checkbox"/>					
15	IN	Proper disposition of returned, previously served, reconditioned & unsafe food	<input type="checkbox"/>	<input type="checkbox"/>					

**GOOD RETAIL PRACTICES**

Good retail practices are preventative measures to control the addition of pathogens, chemicals, and physical objects into food. Mark an X in box if item is not in compliance. Mark an X in appropriate box for COS/R. **COS** – corrected on site during inspection  
**R**- repeat violation

SAFE FOOD AND WATER			COS	R	PROPER USE OF UTENSILS			COS	R
28	NA	Pasteurized eggs used where required	<input type="checkbox"/>	<input type="checkbox"/>	41	IN	In use utensils properly stored	<input type="checkbox"/>	<input type="checkbox"/>
29	IN	Water and ice from approved source	<input type="checkbox"/>	<input type="checkbox"/>	42	IN	Utensils equipment and linen properly stored and used	<input type="checkbox"/>	<input type="checkbox"/>
30	NA	Variance obtained for specialized processing methods	<input type="checkbox"/>	<input type="checkbox"/>	43	IN	Single-use and Single service articles properly stored and used	<input type="checkbox"/>	<input type="checkbox"/>
FOOD TEMPERATURE CONTROL					44	NO	Gloves properly used	<input type="checkbox"/>	<input type="checkbox"/>
31	IN	Proper cooling methods used; adequate equip. for temperature control.	<input type="checkbox"/>	<input type="checkbox"/>	UTENSILS AND EQUIPMENT				
32	NO	Plant food properly cooked for hot holding	<input type="checkbox"/>	<input type="checkbox"/>	45	IN	Food and nonfood contact surfaces; cleanable, properly designed, constructed and used	<input type="checkbox"/>	<input type="checkbox"/>
33	IN	Approved thawing methods used.	<input type="checkbox"/>	<input type="checkbox"/>	46	IN	Warewash facilities; installed, maintained, and used	<input type="checkbox"/>	<input type="checkbox"/>
34	IN	Thermometers provided and accurate	<input type="checkbox"/>	<input type="checkbox"/>	47	IN	Non-food contact surfaces clean	<input type="checkbox"/>	<input type="checkbox"/>
FOOD PROTECTION					PHYSICAL FACILITIES				
35	IN	Food properly labeled original container	<input type="checkbox"/>	<input type="checkbox"/>	48	IN	Hot and cold water available, under pressure	<input type="checkbox"/>	<input type="checkbox"/>
36	IN	Pests and animals not present, no unauthorized persons	<input type="checkbox"/>	<input type="checkbox"/>	49	IN	Plumbing installed; proper backflow devices	<input type="checkbox"/>	<input type="checkbox"/>
37	IN	Contamination prevented during food preparation storage and display	<input type="checkbox"/>	<input type="checkbox"/>	50	IN	Sewage and wastewater properly disposed	<input type="checkbox"/>	<input type="checkbox"/>
38	IN	Personal cleanliness, jewelry	<input type="checkbox"/>	<input type="checkbox"/>	51	IN	Toilet facilities, properly constructed, supplied and clean	<input type="checkbox"/>	<input type="checkbox"/>
39	IN	Wiping cloths; properly used and stored	<input type="checkbox"/>	<input type="checkbox"/>	52	IN	Garbage and refuse, properly disposed facilities and maintained	<input type="checkbox"/>	<input type="checkbox"/>
40	NO	Plant food cooking for hot hold Washing all fruits and vegetables	<input type="checkbox"/>	<input type="checkbox"/>	53	IN	Physical facilities installed maintained and clean	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	54	OUT	Adequate ventilation and lighting, designed and used.	<input type="checkbox"/>	<input type="checkbox"/>

**Menu Review:** Review Conducted  yes  no - New menu items  Yes  No New items soft serv seasonal

**New processes:** Does new process require variance  yes  no  
 What interim step was taken pending variance

Addition to Consumer Advisory  yes  no New menu item which requires consumer advisory

Concerns / Corrections Suggested:

TEMPERATURES – Refrigeration/hot hold/cook					
Item / Location	Temp	Item / Location	Temp	Item / Location	Temp
walk in cooler	36°F	prep cooler	40°F	deli display	38°F
--	°F	--	F °	--	F °
Cook --	°F	Cook --	F °	Cook --	F °

  

WAREWASHING INFORMATION					
Machine Name	Sanitization Method	Thermo Label confirmed	PPM/ temp	Sanitizer Name / Approved Y/N	Sanitizer Type
	manual sanitize	<input type="checkbox"/> yes <input type="checkbox"/> No	--ppm / °F rinse	<input type="checkbox"/> Yes <input type="checkbox"/> No	chlorine

**CDC Risk Code Factor Abbreviations and Violation by Category Numbers Table**

(Use this table to group CDC risk factor listed below with violation from page 1)

Unsafe Sources (US)	Inadequate Cooking (IC)	Improper Hold (IH)	Cross Contamination (CC)	Personal Hygiene (PH)	Other CDC Factors (O)
9	16	18	13	3	1A
10	17	19	14	4	1B
11		20	15	5	2
12		21		6	23
		22		7	24
				8	25
					26

For each violation sited, use above table and record CDC Risk Code Factor abbreviation (such as “US” or “IH”), violation number, list from the Wisconsin Food Code (WFC) the reference number that refers to the area in violation.

**Record CDC risk code abbreviation, violation # from 1<sup>st</sup> page, violation description, Food Code reference, corrective action, and score.**

CDC Code	Violation number	Description of violation, WFC Reference Number including code reference text / Corrective Action Required – Note date(s) of repeat violations on previous inspections.	Compliance Date/ Corrected on site (COS)
O	1A	<p>Current certified food manager is not regularly scheduled or on site at this location. Person in Charge should be an individual who is immediately responsible for day to day operations and can take immediate corrective actions in deficiencies occur. .</p> <p><b>WISCONSIN FOOD CODE REFERENCE</b>            Responsibility 2-101.11      Assignment.C</p> <p>The PERMIT HOLDER shall be the PERSON IN CHARGE or shall designate a PERSON IN CHARGE.</p> <p>Knowledge    2-102.11      Demonstration.</p> <p>Based on the RISKS of foodborne illness inherent to the FOOD operation, during inspections and upon request the PERSON IN CHARGE shall demonstrate to the REGULATORY AUTHORITY knowledge of foodborne disease prevention, application of the HAZARD ANALYSIS CRITICAL CONTROL POINT principles, and the requirements of this Code. The PERSON IN CHARGE shall demonstrate this knowledge by:</p>	90 days --

		<p>(10) Explaining correct procedures for cleaning and SANITIZING UTENSILS and FOOD-CONTACT SURFACES of EQUIPMENT;</p> <p>2-101.11 Assignment FDA Annex 3- Public Health Reasons Designation of a person in charge during all hours of operations ensures the continuous presence of someone who is responsible for monitoring and managing all food establishment operations and who is authorized to take actions to ensure that the Code's objectives are fulfilled. During the day-to-day operation of a food establishment, a person who is immediately available and knowledgeable in both operational and Code requirements is needed to respond to questions and concerns and to resolve problems.</p> <p><b>CORRECTIVE ACTION</b> Operator should designate and have a person who has day to day responsibility over food safety at this location. Designated person should be trained and certified within 90 days.</p>	
<b>CC</b>	<b>14</b>	<p>Food employee noted washing food utensils without sanitizing step. Utensils noted washed and rinsed and placed directly onto drying rack. . <b>WISCONSIN FOOD CODE REFERENCE</b> 4-701.10 Food-Contact Surfaces and Utensils.</p> <p><b>EQUIPMENT FOOD-CONTACT SURFACES and UTENSILS shall be SANITIZED.</b></p> <p>4-702.11 Before Use After Cleaning.C</p> <p><b>UTENSILS and FOOD-CONTACT SURFACES of EQUIPMENT shall be SANITIZED before use after cleaning.</b> <b>CORRECTIVE ACTION</b> Issue was corrected immediately. Discussion with food employee explained the requirement to wash, rinse and sanitize all food contact equipment. Please reinforce training with all food employees regarding this requirement - support for item cited above - Demonstration of Knowledge of critical food safety practices.</p>	<b>COS</b>

Use this section for Good Retail Practice (**GRP**) Violations

<b>Violation #</b>	<b>Description of violation, WFC Reference Number / Corrective Action Required</b>	<b>Compliance Date/ Corrected during inspection</b>
<b>54</b>	<p>Overhead lights in the back room which is now used for significant food preparation including exposed foods were noted without shielding. <b>WISCONSIN FOOD CODE REFERENCE</b> 6-202.11 Light Bulbs, Protective Shielding.</p> <p>(A) Except as specified in ¶ (B) of this section, light bulbs shall be shielded, coated, or otherwise shatter-resistant in areas where there is exposed FOOD; clean EQUIPMENT, UTENSILS, and LINENS; or unwrapped SINGLE-SERVICE and SINGLE-USE ARTICLES.</p> <p>(B) Shielded, coated, or otherwise shatter-resistant bulbs need not be used in areas used only for storing FOOD in unopened PACKAGES, if:</p> <p>(1) The integrity of the PACKAGES can not be affected by broken glass falling onto</p>	<b>7 days</b>

	<p>them; and</p> <p>(2) The PACKAGES are capable of being cleaned of debris from broken bulbs before the PACKAGES are opened.</p> <p>(C) An infrared or other heat lamp shall be protected against breakage by a shield surrounding and extending beyond the bulb so that only the face of the bulb is exposed.</p> <p><b>CORRECTIVE ACTION</b>  Lights must be shielded in the back prep area to prevent potential for glass fragments contaminating food and food utensils. This includes the florescent tubes and coil light bulb.</p>	
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**Long term controls in place**

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***Critical Violations which require greater than one re-inspection and/or repeated CDC Risk Factors violation(s) which are cited on 3 consecutive inspections shall result in the issuance of a re-inspection fee. Re-inspection fees are set based on the complexity of the establishment as follows:***

- ***Complex restaurants \$250.00***
- ***Moderate restaurants \$200.00***
- ***Simple restaurants \$150.00***
- ***Retail >1 M \$300.00***
- ***Retail 25K-1M \$250.00***
- ***Retail remaining \$200.00***

***Violations must be corrected by the compliance date, unless some arrangement has been made with Menasha Health Department. Re-inspection fees will be assessed to all CDC Risk Factor violations requiring more than (1) re-inspection or if the same CDC Risk Factor violation is cited on 3 consecutive inspections. Re-inspection fees will be billed to the owner of the establishment. Failure to pay re-inspection fee shall result in the following potential legal actions:***

- ***Temporary revocation of license***
- ***License will not be renewed pending payment***
- ***Enforcement conference with licensee or licensee representative which would require signed compliance agreement.***

***Operators who wish to challenge the assessment of a re-inspection fee shall submit in writing circumstances and reason that they feel the re-inspection fee should not have been assessed. This statement must be submitted to the Public Health Director. The issue will then be addressed by the City of Menasha Board of Health. Any violations and /or enforcement shall be complied with pending appeal.***

***The City of Menasha posts all Health Department Inspection reports on the City of Menasha Web-Site.***

**Inspection Narrative and information on non-violation observations and/or suggestions:**

**Excellent Inspection – no Violations Noted**

**I understand and agree to comply with the corrections ordered in this report. I understand the failure to comply could result in legal action including loss of license.**

<b>PIC signature or authorized employee</b>	<b>Date</b>	<b>Sanitarian Signature Todd Drew, R.S.</b>	<b>Date</b>

**Food Safety Fact Sheets Attached:**

<input type="checkbox"/> Employee Health	<input type="checkbox"/> Employee Reporting Agreement	<input type="checkbox"/> Personal Hygiene	<input type="checkbox"/> Bare hand contact
<input type="checkbox"/> Responsibilities of the PIC	<input type="checkbox"/> Disposable glove use	<input type="checkbox"/> Cross – Contamination	<input type="checkbox"/> Demonstration of Knowledge
<input type="checkbox"/> Cooling Procedures	<input type="checkbox"/> Thawing Procedures	<input type="checkbox"/> Active Managerial Control	<input type="checkbox"/> Certified Food Manager
<input type="checkbox"/> Consumer Advisory	<input type="checkbox"/> HACCP	<input type="checkbox"/> HACCP Hazard Analysis	<input type="checkbox"/> Serving Safe Food
<input type="checkbox"/> Pre-Inspection	<input type="checkbox"/> Time as a Health Control	<input type="checkbox"/> Allergens	<input type="checkbox"/> Thermometer Calibration
<input type="checkbox"/> Catering	<input type="checkbox"/> Cooking Temperatures	<input type="checkbox"/> Microwave Cooking	<input type="checkbox"/> Interpreting the Inspection Report
<input type="checkbox"/> Variance / HACCP	<input type="checkbox"/> Frozen Foods	<input type="checkbox"/> Receiving	<input type="checkbox"/> Chemical / Physical Contamination
<input type="checkbox"/> Common Foodborne Illnesses	<input type="checkbox"/> Outdoor Events	<input type="checkbox"/> Serving Safe Food	<input checked="" type="checkbox"/> Effective Sanitizing
<input type="checkbox"/> Organizing Coolers	<input type="checkbox"/> Date Marking		