

MENASHA HEALTH DEPARTMENT - RESTAURANT / RETAIL FOOD SERVICE INSPECTION REPORT

Business Name Salsa's Mexican Rest.	Business Address 1550 Appleton Road	County Winnebago	ID # 02-71055-M
Legal Licensee Ramiro Arellano	Mailing Address (Licensee) same	Telephone # (920) 720-0901	

Date of inspection 10/28/13	Bare Hand Contact Plan in Place <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Type of Establishment <input checked="" type="checkbox"/> Restaurant <input type="checkbox"/> Retail <input type="checkbox"/> School <input type="checkbox"/> Liq lic	Is operator Certified <input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> pending <input type="checkbox"/> N/A
Inspection Type <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		Action Taken <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	
Person in Charge Ramiro Arellano		CFM # and expiration CFM # expiration date	

FOODBORNE ILLNESS RISK FACTORS

Circle designated compliance status for each item IN -in compliance OUT – out of compliance N/O – not observed N/A – not applicable	Mark an X in appropriate box for COS and/or R COS – corrected on site during inspection R - repeat violation
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COMPLIANCE STATUS			COS	R
DEMONSTRATION OF KNOWLEDGE				
1A	IN	Certified food manager, duties	<input type="checkbox"/>	<input type="checkbox"/>
1B	IN	Person in charge, ID knowledgeable, duties and responsibilities	<input type="checkbox"/>	<input type="checkbox"/>
EMPLOYEE HEALTH				
2	IN	Management awareness, policy present	<input type="checkbox"/>	<input type="checkbox"/>
3	IN	Proper use of reporting, restriction and exclusion	<input type="checkbox"/>	<input type="checkbox"/>
GOOD HYGENIC PRATICES				
4	IN	Proper eating, tasting, drinking	<input type="checkbox"/>	<input type="checkbox"/>
5	IN	No discharge from eyes, nose and mouth	<input type="checkbox"/>	<input type="checkbox"/>
PREVENTING CONTAMINATION FROM HANDS				
6	IN	Hands cleaned and properly washed	<input type="checkbox"/>	<input type="checkbox"/>
7	IN	No bare hand contact or using approved plan	<input type="checkbox"/>	<input type="checkbox"/>
8	IN	Adequate hand washing facilities supplied and accessible	<input type="checkbox"/>	<input type="checkbox"/>
APPROVED SOURCE				
9	IN	Food obtained from approved source	<input type="checkbox"/>	<input type="checkbox"/>
10	NO	Food received at proper temperature	<input type="checkbox"/>	<input type="checkbox"/>
11	IN	Food in good condition, safe, unadulterated	<input type="checkbox"/>	<input type="checkbox"/>
12	NA	Records available, shell stock tags, parasite destruction	<input type="checkbox"/>	<input type="checkbox"/>
PROTECTION FROM CONTAMINATION				
13	IN	Food separated and protected	<input type="checkbox"/>	<input type="checkbox"/>
14	IN	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"/>

COMPLIANCE STATUS			COS	R
POTENTIALLY HAZARDOUS FOOD TEMPERATURE				
16	NO	Proper cooking time and temperature	<input type="checkbox"/>	<input type="checkbox"/>
17	NO	Proper re-heating procedures for hot holding	<input type="checkbox"/>	<input type="checkbox"/>
18	NO	Proper cooling time and temperature	<input type="checkbox"/>	<input type="checkbox"/>
19	IN	Proper hot holding temperatures	<input type="checkbox"/>	<input type="checkbox"/>
20	IN	Proper cold holding temperatures	<input type="checkbox"/>	<input type="checkbox"/>
21	OUT	Proper date marking and disposition	<input type="checkbox"/>	<input type="checkbox"/>
22	NA	Time as a public health control; procedures and record	<input type="checkbox"/>	<input type="checkbox"/>

CONSUMER ADVISORY

23	IN	Consumer advisory supplied	<input type="checkbox"/>	<input type="checkbox"/>
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HIGHLY SUSEPTABLE POPULATIONS

24	NA	Pasteurized foods used; prohibited foods not offered	<input type="checkbox"/>	<input type="checkbox"/>
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CHEMICAL

25	NA	Food additives approved and properly use	<input type="checkbox"/>	<input type="checkbox"/>
26	IN	Toxic substances properly identified, stored, used	<input checked="" type="checkbox"/>	<input type="checkbox"/>

CONFORMANCE WITH APPROVED PROCEDURES

27	NA	Compliance with variance, specialized process, HACCP plan	<input type="checkbox"/>	<input type="checkbox"/>
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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.

Risk factor violations should be corrected on site during the inspection unless there is some reason that correction cannot be immediately made.

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	IN	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	OUT	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	IN	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

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
upright refrigerator	37°F	walk in cooler	36°F	prep cooler	40°F
hot hold seasoned meat	136°F	hot hold refried beans	145°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	200ppm / 72 °F rinse	QUAT <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	QUAT

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 1st page, violation description, Food Code reference, corrective action, and score.

CDC Code	Violation number P- Priority Pf- Priority Foundation	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)
IH	21 <input checked="" type="checkbox"/> P <input checked="" type="checkbox"/> Pf <input type="checkbox"/> C	<p>Ready to eat potentially hazardous (TCS) foods noted in refrigeration without date marking and with expired dates (>7 days).</p> <p>WISCONSIN FOOD CODE REFERENCE 3-501.17 Ready-to-Eat, Potentially Hazardous Food (Time/Temperature Control for Safety Food), Date Marking. (A) Except when PACKAGING FOOD using a REDUCED OXYGEN PACKAGING method as specified under § 3-502.12, and except as specified in ¶¶ (D), (E), and (G) of this section, refrigerated, READY-TO-EAT, POTENTIALLY HAZARDOUS FOOD (TIME/TEMPERATURE CONTROL FOR SAFETY FOOD) prepared and held in a FOOD ESTABLISHMENT for more than 24 hours shall be clearly marked to indicate the date or day by which the FOOD shall be consumed on the PREMISES, sold, or discarded when held at a temperature and time combination of 5°C (41°F) or less for a maximum of 7 days. The day of preparation shall be counted as Day 1. Pf</p> <p>3-501.18 Ready-to-Eat, Potentially Hazardous Food (Time/Temperature Control for Safety Food), Disposition. (A) A FOOD specified under ¶ 3-501.17 (A) or (B) shall be discarded if it: (1) Exceeds the temperature and time combination specified in ¶ 3-501.17 (A), except time that the product is frozen; P</p>	COS

		<p>CORRECTIVE ACTION</p> <p>All ready to eat foods which have been cooked cooled and refrigerated must be dated for 7 days and either used or disposed of in that time. Freezing suspends the 7 day period, make sure product containers are remarked to indicate.</p> <p>Products which are dated in excess of 7 days were ordered disposed of.</p>	
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Use this section for Good Retail Practice (GRP) Violations

Violation #	Description of violation, WFC Reference Number / Corrective Action Required	Compliance Date/ Corrected during inspection
45 <input type="checkbox"/> P <input type="checkbox"/> Pf <input type="checkbox"/> C	<p>Copper pan was noted on the back cook line. Ramiro stated that the copper utensil was used for pork carnitas.</p> <p>WISCONSIN FOOD CODE REFERENCE 4-101.14 Copper, Use Limitation. (A) Except as specified in ¶ (B) of this section, copper and copper alloys such as brass may not be used in contact with a FOOD that has a pH below 6</p> <p>CORRECTIVE ACTION Raw pork and associated ingredients could very likely be at or below a pH of 6. Copper pan should not be used for food preparation based on pH limitation. If you wish you may have the raw ingredient pH tested and if above pH 6 with reasonable room for product variation could be used.</p>	Immediate
54 <input type="checkbox"/> P <input type="checkbox"/> Pf <input type="checkbox"/> C	<p>Employee's personal clothing (coats) were noted hung immediately on a rack which was used to store food and food containers.</p> <p>WISCONSIN FOOD CODE REFERENCE 6-403.11 Designated Areas. (A) Areas designated for EMPLOYEES to eat, drink, and use tobacco shall be located so that FOOD, EQUIPMENT, LINENS, and SINGLE-SERVICE and SINGLE-USE ARTICLES are protected from contamination. (B) Lockers or other suitable facilities shall be located in a designated room or area where contamination of FOOD, EQUIPMENT, UTENSILS, LINENS, and SINGLE-SERVICE and SINGLE-USE ARTICLES cannot occur.</p> <p>CORRECTIVE ACTION Employee clothing and personal belongings must be stored in a designated area away from food, food contact utensils and food preparation.</p>	COS

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:

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.

PIC signature or authorized employee	Date	Sanitarian Signature Todd Drew, R.S.	Date

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 type="checkbox"/> Effective Sanitizing
<input type="checkbox"/> Organizing Coolers	<input type="checkbox"/> Date Marking		