



FOOD ESTABLISHMENT INSPECTION REPORT

Phone: 781-334-9481

| | | | | | |
|------------------------|---|------------|-----------------|--|---|
| Name | <u>Huckleberry School</u> | Date | <u>10/18/18</u> | Type of Operation(s) | Type of Inspection |
| Address | <u>5 Knoll Road</u> | Risk Level | | <input checked="" type="checkbox"/> Food Service | <input checked="" type="checkbox"/> Routine |
| Telephone | <u>781-334-7206</u> | | | <input type="checkbox"/> Retail | <input type="checkbox"/> Re-inspection |
| Owner | <u>J McCarthy & Lynnfield Public Schools</u> | HACCP Y/N | | <input type="checkbox"/> Residential Kitchen | Previous Inspection Date: |
| Person in Charge (PIC) | <u>Andrea Di Stefano</u> Cert. <u>Y/N</u> <u>2020</u> | Time In: | <u>10:15 am</u> | <input type="checkbox"/> Mobile | <input type="checkbox"/> Pre-operation |
| Inspector | <u>Kristin McKee</u> | Time Out: | <u>10:50 am</u> | <input type="checkbox"/> Temporary | <input type="checkbox"/> Suspect Illness |
| | | Permit No. | | <input type="checkbox"/> Caterer | <input type="checkbox"/> General Complaint |
| | | | | <input type="checkbox"/> Bed & Breakfast | <input type="checkbox"/> HACCP |
| | | | | | <input type="checkbox"/> Other |

Each violation checked requires an explanation on the narrative page(s) and a citation of specific provision(s) violated.

Allergen - Food Training Menu
Violations Related to Foodborne Illness Interventions and Risk Factors (Red Items)

Violations marked may pose an imminent health hazard and require immediate corrective action as determined by the Board of Health.

Non-compliance with:

- ☐ Anti-Choking 590.009 (E)
☐ Tobacco 590.009 (F)
☐ Allergen Awareness 590.009 (G)
☐ Local Law

FOOD PROTECTION MANAGEMENT

- ☐ 1. PIC Assigned / Knowledgeable / Duties

EMPLOYEE HEALTH

- ☐ 2. Reporting of Diseases by Food Employee and PIC
☐ 3. Personnel with Infections Restricted / Excluded

FOOD FROM APPROVED SOURCE

- ☐ 4. Food and Water from Approved Source
☐ 5. Receiving / Condition
☐ 6. Tags / Records / Accuracy of Ingredient Statements
☐ 7. Conformance with Approved Procedures / HACCP Plans

PROTECTION FROM CONTAMINATION

- ☐ 8. Separation / Segregation / Protection
☐ 9. Food Contact Surfaces Cleaning and Sanitizing
☐ 10. Proper Adequate Handwashing
☐ 11. Good Hygienic Practices

- ☐ 12. Prevention of Contamination from Hands

- ☐ 13. Handwash Facilities

PROTECTION FROM CHEMICALS

- ☐ 14. Approved Food or Color Additives
☐ 15. Toxic Chemicals

TIME/TEMPERATURE CONTROLS (Potentially Hazardous Foods)

- ☐ 16. Cooking Temperatures
☐ 17. Reheating
☐ 18. Cooling
☐ 19. Hot and Cold Holding
☐ 20. Time as a Public Health Control

REQUIREMENTS FOR HIGHLY SUSCEPTIBLE POPULATIONS (HSP)

- ☐ 21. Food and Food Preparation for HSP

CONSUMER ADVISORY

- ☐ 22. Posting of Consumer Advisories

Violations Related to Good Retail Practices (Blue Items)

Critical (C) violations marked must be corrected immediately or within 10 days as determined by the Board of Health. Non-critical (N) violations must be corrected immediately or within 90 days as determined by the Board of Health.

| C | N | | |
|---|---|----------------------------------|-----------------|
| | | 23. Management and Personnel | (FC-2)(590.003) |
| | | 24. Food and Food Protection | (FC-3)(590.004) |
| | | 25. Equipment and Utensils | (FC-4)(590.005) |
| 1 | 1 | 26. Water, Plumbing and Waste | (FC-5)(590.006) |
| | | 27. Physical Facility | (FC-6)(590.007) |
| | | 28. Poisonous or Toxic Materials | (FC-7)(590.008) |
| | | 29. Special Requirements | (590.009) |
| | | 30. Other | |

Number of Violated Provisions Related To Foodborne Illnesses Interventions and Risk Factors (Red Items 1-22):

0

Official Order for Correction: Based on an inspection today, the items checked indicate violations of 105 CMR 590.000/federal Food Code. This report, when signed below by a Board of Health member or its agent constitutes an order of the Board of Health. Failure to correct violations cited in this report may result in suspension or revocation of the food establishment permit and cessation of food establishment operations. If aggrieved by this order, you have a right to a hearing. Your request must be in writing and submitted to the Board of Health at the above address within 10 days of receipt of this order.

CORRECT BY:

| | | |
|---|---------------------------------|---------------------------------|
| Inspector's Signature: <u>Kristin McKee</u> | Print: <u>Kristin McKee</u> | Page <u>1</u> of <u>2</u> Pages |
| PIC's Signature: <u>Andrea Di Stefano</u> | Print: <u>Andrea Di Stefano</u> | |

Lynfield

Huckberry School

01/05/23

Page:

of 2

| Item No. | Code Reference | C Critical Item R Red Item | DESCRIPTION OF VIOLATION / PLAN OF CORRECTION <small>PLEASE PRINT CLEARLY</small> | Date Verified |
|----------|----------------|-------------------------------|--|---------------|
| | | | Hand sink - OK | |
| | | | Beef / ground Taco mix in steam table 178°F - OK | |
| | | | Rice mix in steam table 148-150°F - OK | |
| | | | Walden 340°F - OK Spot check milk dates OK | |
| | | | Storage room neat / organized - OK | |
| | | | Walden grease in 2 8" x 8" pans frozen OK | |
| | | | Employee restroom - Stocked OK but long time for hot water - Need to shorten time to reach 110-112°F | |
| 26 | | C | Tran's unit 380°F - OK | |
| | | | Studen a hood Dec 29, 2017 365 Day Sched OK | |
| | | | Grease trap last log 2017 - when was grease trap last cleaned? | |
| | | | 3-bay sink 200 ppm Quat - OK Sawtooth set up - test kit OK | |
| 26 | | NC | Wall / Water Plumbing is leaking next to 3 bay sink - needs repair | |
| | | | Auto washer not in use today - per PIC rarely use in school lunch service | |
| | | | Milk chest - 40°F - OK Spot check dates - OK | |
| | | | Keep food temp log but missing recording Chx when call in raw State + Cool for Shreds - Need to record + follow | |
| | | | 165°F temp then time cooling 140°F to 70°F in 2 hrs or 70°F to 41°F | |
| | | | or the temp cooling after 165°F 140°F to 41°F total 4 hrs | |
| | | | Amperster area neat + tidy Closed - OK | |
| | | | Tran's unit 40°F - OK | |

Staff w/ gloves + hair restraint - ok

| | | | | |
|-----------------------------------|---------------------------------------|--|--|--|
| Discussion With Person in Charge: | Staff w/ gloves + hair restraint - ok | | | |
| | | | | |
| | | | | |
| Inspector's Signature: | Print: | | | |
| PIC's Signature: | Print: | | | |



FOOD ESTABLISHMENT INSPECTION REPORT

Phone: 781-334-9480

| | | | |
|--|-----------------------|--|--|
| Name <u>Huckleberry School</u> | Date <u>3/28/19</u> | Type of Operation(s) <input checked="" type="checkbox"/> Food Service <input type="checkbox"/> Retail <input type="checkbox"/> Residential Kitchen <input type="checkbox"/> Mobile <input type="checkbox"/> Temporary <input type="checkbox"/> Caterer <input type="checkbox"/> Bed & Breakfast | Type of Inspection <input checked="" type="checkbox"/> Routine <input type="checkbox"/> Re-inspection Previous Inspection Date: <input type="checkbox"/> Pre-operation <input type="checkbox"/> Suspect Illness <input type="checkbox"/> General Complaint <input type="checkbox"/> HACCP <input type="checkbox"/> Other |
| Address <u>5 Knoll Rd</u> | Risk Level | | |
| Telephone <u>781-334-7206</u> | | | |
| Owner <u>James McCarthy - Lynnfield Public Schools</u> | HACCP Y/N | | |
| Person in Charge (PIC) <u>ANDREA DISTEFANO Cert. SIN</u> | Time In: <u>10 AM</u> | Permit No. <u>0063</u> | |
| Inspector <u>DEBORAH ROSATI, MS, RS</u> | Out: | | |

Each violation checked requires an explanation on the narrative page(s) and a citation of specific provision(s) violated.

FSM: Andrea DiStefano to 2020**Violations Related to Foodborne Illness Interventions and Risk Factors (Red Items)**

Violations marked may pose an imminent health hazard and require immediate corrective action as determined by the Board of Health.

Awareness: Poster Menu Cert MAY 2018**Non-compliance with:**

- ☐ Anti-Choking 590.009 (E)
☐ Tobacco 590.009 (F)
☐ Allergen Awareness 590.009 (G)
☐ Local Law

FOOD PROTECTION MANAGEMENT

- ☐ 1. PIC Assigned / Knowledgeable / Duties

EMPLOYEE HEALTH

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- ☐ 21. Food and Food Preparation for HSP

CONSUMER ADVISORY

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Violations Related to Good Retail Practices (Blue Items)

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| | | 27. Physical Facility (FC-6)(590.007) |
| | | 28. Poisonous or Toxic Materials (FC-7)(590.008) |
| | | 29. Special Requirements (590.009) |
| | | 30. Other |

Number of Violated Provisions Related To Foodborne Illnesses Interventions and Risk Factors (Red Items 1-22):

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CORRECT BY:

| | | |
|--|--------------------------------|---------------------------------|
| Inspector's Signature: <u>Deborah Rosati</u> | Print: <u>DEBORAH ROSATI</u> | Page <u>1</u> of <u>2</u> Pages |
| PIC's Signature: <u>Andrea DiStefano</u> | Print: <u>ANDREA DISTEFANO</u> | |



TOWN OR CITY OF

LYNNFIELD

Establishment Name: HUCKLEBERRY SCHOOL

Date: 3/28/19

Page: 2 of 2

| Item No. | Code Reference | C - Critical Item R - Red Item | DESCRIPTION OF VIOLATION / PLAN OF CORRECTION PLEASE PRINT CLEARLY | Date Verified |
|---|----------------|-----------------------------------|--|---|
| | | | NOTE - SERV SAFE - ANDREA DISTEFANO, BARBARA COLLINS | |
| | | | NOTE - NACHOS FOR LUNCH | |
| | | | GROUND BEEF 162°F, RICE + BEANS 145°F | |
| | | | - CHEESE SAUCE PLACED IN HOT WELL TO HEAT - RELOCATED TO STEAMER TO HEAT QUICKLY - CHEESE AT 190°F | 3/28 |
| | | | - PIZZA IN HOT HOLDING UNIT AT 98°F - PLACED IN OVEN TO RE-HEAT, RECOMMEND HAVING THERMOMETER ON UNIT REPAIRED TO WORK / DISPLAY TEMPERATURE. | 3/28 |
| | | | NOTE - TPAULSEN UPRIGHT - CHICKEN 35°F. HEATED - HOLDING AT 153°F. | |
| | | | W/I COOLER 35°F W/I FREEZER 8°F | |
| | | | NOTES DUMPSTER AREA - CLEAN | |
| | | | EXHAUST HOOD - FEB. 22, 2019 | |
| | | | DISHMACHINE WASH 180°F BE 150°F | |
| | | | RINSE 183°F - PLATE TEMP 174°F | |
| Discussion With Person in Charge: | | | | |
| | | | Corrective Action Required: | <input type="checkbox"/> No <input type="checkbox"/> Yes |
| | | | <input type="checkbox"/> Voluntary Compliance | <input type="checkbox"/> Employee Restriction / Exclusion |
| | | | <input type="checkbox"/> Re-inspection Scheduled | <input type="checkbox"/> Emergency Suspension |
| | | | <input type="checkbox"/> Embargo | <input type="checkbox"/> Emergency Closure |
| | | | <input type="checkbox"/> Voluntary Disposal | <input type="checkbox"/> Other: |
| Inspector's Signature: Deborah Rosati Print: DEBORAH ROSATI | | | | |
| PIC's Signature: Andrea Distefano Print: Distefano Andrea | | | | |



THE COMMONWEALTH OF MASSACHUSETTS

CITY / TOWN of

Lynnfield

Board of Health

FOOD ESTABLISHMENT INSPECTION REPORT

Phone:

781-334-9481

| | | | | | |
|------------------------|---------------------------------------|------------|---------|--|---|
| Name | Lynnfield High School | Date | 10/3/18 | Type of Operation(s) | Type of Inspection |
| Address | 275 Essex St | Risk Level | | <input checked="" type="checkbox"/> Food Service | <input checked="" type="checkbox"/> Routine |
| Telephone | | | | <input type="checkbox"/> Retail | <input type="checkbox"/> Re-inspection |
| Owner | J McCarthy & Lynnfield Public Schools | HACCP Y/N | | <input type="checkbox"/> Residential Kitchen | Previous Inspection Date: |
| Person in Charge (PIC) | Flavia Torres | | | <input type="checkbox"/> Mobile | <input type="checkbox"/> Pre-operation |
| Inspector | Christin McK... | | | <input type="checkbox"/> Temporary | <input type="checkbox"/> Suspect Illness |
| | | | | <input type="checkbox"/> Caterer | <input type="checkbox"/> General Complaint |
| | | | | <input type="checkbox"/> Bed & Breakfast | <input type="checkbox"/> HACCP |
| | | | | Permit No. 0036 | <input type="checkbox"/> Other |

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- ☐ Local Law

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REQUIREMENTS FOR HIGHLY SUSCEPTIBLE POPULATIONS (HSP)

- ☐ 21. Food and Food Preparation for HSP

CONSUMER ADVISORY

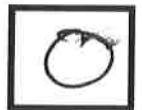
- ☐ 22. Posting of Consumer Advisories

Violations Related to Good Retail Practices (Blue Items)

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CORRECT BY:

| | | |
|--|------------------------|-------------------|
| Inspector's Signature: Christin McK... | Print: Christin McK... | Page 1 of 2 Pages |
| PIC's Signature: Flavia Torres | Print: FLAVIA TORRES | |

10/4/2018

Town of Lynnfield, MA Mail - Dumpsters at Schools



Kristin Mcrae <kmcrae@town.lynnfield.ma.us>

Dumpsters at Schools

1 message

Kristin Mcrae <kmcrae@town.lynnfield.ma.us>

Thu, Oct 4, 2018 at 1:34 PM

To: Anthony Fratonl <afratonl@town.lynnfield.ma.us>

Cc: John Tomasz <jtomasz@town.lynnfield.ma.us>, "McCarthy, James" <mccarthyjam@lynnfield.k12.ma.us>

Hi Tony,

The dumpster lid at the Middle School is broken and the top of the dumpster is warped and should be serviced/replaced. There are flying insects as the lid is open. It maybe helpful to replace with the type that has side-by-side top lids for easy open/close. Also the High School lids were open. Per food code, the dumpster lids need to be kept closed. JRM should take a closer look at their dumpsters in place to ensure the lids can be opened and closed easily and change out those that are deficient so that the custodians can do their part.

Thank you,

Kristin

Kristin Esposito McRae, RS

Director

Town of Lynnfield Board of Health

55 Summer Street

Lynnfield, MA 01940

781-334-9481 Direct Line

781-334-9489 Facsimile

Dumpsters
LHS
2MS



THE COMMONWEALTH OF MASSACHUSETTS

CITY / TOWN of

Lynnfield

Board of Health

FOOD ESTABLISHMENT INSPECTION REPORT

Phone:

781-334-9480

| | | | | | |
|------------------------|--------------------------------|------------|----------|--|---|
| Name | Lynnfield High School | Date | 4/1/19 | Type of Operation(s) | Type of Inspection |
| Address | 275 Essex St | Risk Level | | <input checked="" type="checkbox"/> Food Service | <input checked="" type="checkbox"/> Routine |
| Telephone | 781-334-7215 | | | <input type="checkbox"/> Retail | <input type="checkbox"/> Re-inspection |
| Owner | J McCarthy Lynnfield PubliZ Sh | HACCP Y/N | | <input type="checkbox"/> Residential Kitchen | Previous Inspection |
| Person in Charge (PIC) | FLAVIA TORRES | | | <input type="checkbox"/> Mobile | Date: |
| Inspector | DEBORAH ROSATI, MS, RS | Time In: | 10:15 AM | <input type="checkbox"/> Temporary | <input type="checkbox"/> Pre-operation |
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| | | | | | <input type="checkbox"/> Other |

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FBI: Flavia Torres + Cathy Benafre

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Awareness: ☒ menu ☒ poster ☒ cert FLAVIA TORRES

Non-compliance with:

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- ☐ Tobacco 590.009 (F)
- ☐ Allergen Awareness 590.009 (G)
- ☐ Local Law

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| PIC's Signature: | FLAVIA TORRES | Print: | FLAVIA TORRES |
| | | | Page 1 of 2 Pages |



LYNNFIELD

Date: 4/1/19

Page: 2 of 2[illegible]



THE COMMONWEALTH OF MASSACHUSETTS

CITY / TOWN of

Lynnfield

Board of Health

FOOD ESTABLISHMENT INSPECTION REPORT

Phone: 781-3349481

| | | | |
|--|--|--|--|
| Name Lynnfield Middle School | Date 10/04/18 | Type of Operation(s) <input checked="" type="checkbox"/> Food Service <input type="checkbox"/> Retail <input type="checkbox"/> Residential Kitchen <input type="checkbox"/> Mobile <input type="checkbox"/> Temporary <input type="checkbox"/> Caterer <input type="checkbox"/> Bed & Breakfast | Type of Inspection <input checked="" type="checkbox"/> Routine <input type="checkbox"/> Re-inspection Previous Inspection Date: <input type="checkbox"/> Pre-operation <input type="checkbox"/> Suspect Illness <input type="checkbox"/> General Complaint <input type="checkbox"/> HACCP <input type="checkbox"/> Other |
| Address 505 Main St | Risk Level | Permit No. BLR-20018-0038 | |
| Telephone | HACCP Y/N | | |
| Owner J. McCarthy for Lynnfield Public Schools | Time In: 10:00am Out: 11:10am | | |
| Person in Charge (PIC) Barbara LaRossa Cert. Y/N X 2020 | | | |
| Inspector J. McRae | | | |

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☐ 20. Time as a Public Health Control

REQUIREMENTS FOR HIGHLY SUSCEPTIBLE POPULATIONS (HSP)

- ☐ 21. Food and Food Preparation for HSP

CONSUMER ADVISORY

- ☐ 22. Posting of Consumer Advisories

Violations Related to Good Retail Practices (Blue Items)

Critical (C) violations marked must be corrected immediately or within 10 days as determined by the Board of Health. Non-critical (N) violations must be corrected immediately or within 90 days as determined by the Board of Health.

| C | N | |
|---|---|--|
| | | 23. Management and Personnel (FC-2)(590.003) |
| 2 | | 24. Food and Food Protection (FC-3)(590.004) |
| | | 25. Equipment and Utensils (FC-4)(590.005) |
| | 1 | 26. Water, Plumbing and Waste (FC-5)(590.006) |
| | | 27. Physical Facility (FC-6)(590.007) |
| | | 28. Poisonous or Toxic Materials (FC-7)(590.008) |
| | | 29. Special Requirements (590.009) |
| | | 30. Other |

Number of Violated Provisions Related To Foodborne Illnesses Interventions and Risk Factors (Red Items 1-22):



Official Order for Correction: Based on an inspection today, the items checked indicate violations of 105 CMR 590.000/federal Food Code. This report, when signed below by a Board of Health member or its agent constitutes an order of the Board of Health. Failure to correct violations cited in this report may result in suspension or revocation of the food establishment permit and cessation of food establishment operations. If aggrieved by this order, you have a right to a hearing. Your request must be in writing and submitted to the Board of Health at the above address within 10 days of receipt of this order.

CORRECT BY:

| | | |
|--|---------------------------|---------------------------------|
| Inspector's Signature: J. McRae | Print: James McRae | Page 1 of 2 Pages |
| PIC's Signature: James McRae | Print: | |



TOWN OR CITY OF Lynnfield

Establishment Name: Lynnfield Middle School Date: 10/04/18 Page: 2 of 2

| Item No. | Code Reference | C Critical Item R Red Item | DESCRIPTION OF VIOLATION / PLAN OF CORRECTION <small>PLEASE PRINT CLEARLY</small> | Date Verified |
|------------------------|----------------|-------------------------------|---|---------------|
| 20 | | NC | Hand sink - OK - bucket below but not leaks at the moment Dumpster lid for trash is broken + top of dumpster is warped Flying insects around open dumpster - Dumpster needs service/replacement. A lid w/ divided sides may be more easily loaded + closing lids made easier 2nd hand sink - OK Staff wearing gloves, hair restraint Staff taking food Temp's good 3-bay sink 200 ppm Quat w/ test kit - OK Milk Chest - The milk Carthys are frozen not log'd + have expired sept-28th Walkin Cooler - 38°F - OK Walkin Freezer - 8°F - OK C Some areas lacking shelving / Stacked Carthys C bags of ice on floor - needs min 6" off floor Cht cooled to 170°F after drying placed back in warmer Temp 110°F - OK Food Storage Room - neat + organized - OK Antibacterial 185°F - Final rimed Food Storage Apr 30, 2018 - 365 Day Sched ✓ Window Sills - Some dust accumulation, add to cleaning schedule Discussion With Person in Charge: The storm spoiled OK but longer time for hot water to warm up - need shorter time to 110-120°F | |
| Inspector's Signature: | | | Print: | |
| PIC's Signature: | | | Print: | |

| Corrective Action Required: | | No | Yes |
|--|---|----|-----|
| <input type="checkbox"/> Voluntary Compliance | <input type="checkbox"/> Employee Restriction / Exclusion | | |
| <input type="checkbox"/> Re-inspection Scheduled | <input type="checkbox"/> Emergency Suspension | | |
| <input type="checkbox"/> Embargo | <input type="checkbox"/> Emergency Closure | | |
| <input type="checkbox"/> Voluntary Disposal | <input type="checkbox"/> Other: | | |



Kristin Mcrae <kmcrae@town.lynnfield.ma.us>

Dumpsters at Schools

1 message

Kristin Mcrae <kmcrae@town.lynnfield.ma.us>

Thu, Oct 4, 2018 at 1:34 PM

To: Anthony Fraton <afraton@town.lynnfield.ma.us>

Cc: John Tomasz <jtomasz@town.lynnfield.ma.us>, "McCarthy, James" <mccarthyjam@lynnfield.k12.ma.us>

Hi Tony,

The dumpster lid at the Middle School is broken and the top of the dumpster is warped and should be serviced/replaced. There are flying insects as the lid is open. It maybe helpful to replace with the type that has side-by-side top lids for easy open/close. Also the High School lids were open. Per food code, the dumpster lids need to be kept closed. JRM should take a closer look at their dumpsters in place to ensure the lids can be opened and closed easily and change out those that are deficient so that the custodians can do their part.

Thank you,

Kristin

Kristin Esposito McRae, RS

Director

Town of Lynnfield Board of Health

55 Summer Street

Lynnfield, MA 01940

781-334-9481 Direct Line

781-334-9489 Facsimile

Dumpsters
LHS
2MS



THE COMMONWEALTH OF MASSACHUSETTS

CITY / TOWN of

Lynnfield

Board of Health

FOOD ESTABLISHMENT INSPECTION REPORT

Phone: 781-334-9486

| | | | | | |
|------------------------|-------------------------------------|-------------------|---------------|--|---|
| Name | Lynnfield Middle School | Date | 3/20/19 | Type of Operation(s) | Type of Inspection |
| Address | 505 Main St | Risk Level | | <input checked="" type="checkbox"/> Food Service | <input checked="" type="checkbox"/> Routine |
| Telephone | 781-334-7320 | | | <input type="checkbox"/> Retail | <input type="checkbox"/> Re-inspection |
| Owner | J McCarthy for Lynnfield Public Sch | HACCP Y/N | | <input type="checkbox"/> Residential Kitchen | Previous Inspection Date: |
| Person in Charge (PIC) | JAMES MCCARTHY | Cert. Y/N | | <input type="checkbox"/> Mobile | <input type="checkbox"/> Pre-operation |
| Inspector | DEBORAH ROSATI, MS, RS | Time In: 10:45 AM | Out: 10:45 AM | <input type="checkbox"/> Temporary | <input type="checkbox"/> Suspect Illness |
| | | | | <input type="checkbox"/> Caterer | <input type="checkbox"/> General Complaint |
| | | | | <input type="checkbox"/> Bed & Breakfast | <input type="checkbox"/> HACCP |
| | | | | Permit No. BHP 2019-0065 | <input type="checkbox"/> Other |

Each violation checked requires an explanation on the narrative page(s) and a citation of specific provision(s) violated.

FSM: Barbara La Russa to 2020

Violations Related to Foodborne Illness Interventions and Risk Factors (Red Items)

Violations marked may pose an imminent health hazard and require immediate corrective action as determined by the Board of Health.

Awareness: Menu MAY 2, 2018 Cert poster

Non-compliance with:

- ☐ Anti-Choking 590.009 (E)
- ☐ Tobacco 590.009 (F)
- ☐ Allergen Awareness 590.009 (G)
- ☐ Local Law

6 TRAINED IN ALLERGY

FOOD PROTECTION MANAGEMENT

- ☐ 1. PIC Assigned / Knowledgeable / Duties

EMPLOYEE HEALTH

- ☐ 2. Reporting of Diseases by Food Employee and PIC
- ☐ 3. Personnel with Infections Restricted / Excluded

FOOD FROM APPROVED SOURCE

- ☐ 4. Food and Water from Approved Source
- ☐ 5. Receiving / Condition
- ☐ 6. Tags / Records / Accuracy of Ingredient Statements
- ☐ 7. Conformance with Approved Procedures / HACCP Plans

PROTECTION FROM CONTAMINATION

- ☐ 8. Separation / Segregation / Protection
- ☒ 9. Food Contact Surfaces Cleaning and Sanitizing
- ☐ 10. Proper Adequate Handwashing
- ☐ 11. Good Hygienic Practices

- ☐ 12. Prevention of Contamination from Hands
- ☐ 13. Handwash Facilities

PROTECTION FROM CHEMICALS

- ☐ 14. Approved Food or Color Additives
- ☐ 15. Toxic Chemicals

TIME/TEMPERATURE CONTROLS (Potentially Hazardous Foods)

- ☐ 16. Cooking Temperatures
- ☐ 17. Reheating
- ☐ 18. Cooling
- ☒ 19. Hot and Cold Holding
- ☐ 20. Time as a Public Health Control

REQUIREMENTS FOR HIGHLY SUSCEPTIBLE POPULATIONS (HSP)

- ☐ 21. Food and Food Preparation for HSP

CONSUMER ADVISORY

- ☐ 22. Posting of Consumer Advisories

Number of Violated Provisions Related To Foodborne Illnesses Interventions and Risk Factors (Red Items 1-22):

3

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CORRECT BY:

| C | N |
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| | |

- 23. Management and Personnel (FC-2)(590.003)
- 24. Food and Food Protection (FC-3)(590.004)
- 25. Equipment and Utensils (FC-4)(590.005)
- 26. Water, Plumbing and Waste (FC-5)(590.006)
- 27. Physical Facility (FC-6)(590.007)
- 28. Poisonous or Toxic Materials (FC-7)(590.008)
- 29. Special Requirements (590.009)
- 30. Other

| | | |
|---------------------------------------|-------------------------|-------------------|
| Inspector's Signature: Deborah Rosati | Print: DEBORAH ROSATI | Page 1 of 3 Pages |
| PIC's Signature: James K McCarthy | Print: James K McCarthy | |

**FOOD ESTABLISHMENT INSPECTION REPORT**Phone: 781-334-9480

| | | | |
|--|---|--|--|
| Name <u>LYNNFIELD MIDDLE SCHOOL</u> | Date <u>4/1/19</u> | Type of Operation(s) <input checked="" type="checkbox"/> Food Service <input type="checkbox"/> Retail <input type="checkbox"/> Residential Kitchen <input type="checkbox"/> Mobile <input type="checkbox"/> Temporary <input type="checkbox"/> Caterer <input type="checkbox"/> Bed & Breakfast | Type of Inspection <input type="checkbox"/> Routine <input checked="" type="checkbox"/> Re-inspection Previous Inspection Date: <u>3/20/19</u> <input type="checkbox"/> Pre-operation <input type="checkbox"/> Suspect Illness <input type="checkbox"/> General Complaint <input type="checkbox"/> HACCP <input type="checkbox"/> Other _____ |
| Address <u>505 MAIN ST.</u> | Risk Level | | |
| Telephone <u>781-334-7320</u> | | | |
| Owner | HACCP Y/N | | |
| Person in Charge (PIC) <u>JAMES MCCARTHY</u> | Cert. Y/N | | |
| Inspector <u>DEBORAH ROSATI, MS, RS</u> | Time In: <u>12:00</u> Out: <u>2:00 PM</u> | Permit No. <u>65</u> | |

Each violation checked requires an explanation on the narrative page(s) and a citation of specific provision(s) violated.

Violations Related to Foodborne Illness Interventions and Risk Factors (Red Items)

Violations marked may pose an imminent health hazard and require immediate corrective action as determined by the Board of Health.

Non-compliance with:

- ☐ Anti-Choking 590.009 (E)
☐ Tobacco 590.009 (F)
☐ Allergen Awareness 590.009 (G)
☐ Local Law

FOOD PROTECTION MANAGEMENT

- ☐ 1. PIC Assigned / Knowledgeable / Duties

EMPLOYEE HEALTH

- ☐ 2. Reporting of Diseases by Food Employee and PIC
☐ 3. Personnel with Infections Restricted / Excluded

FOOD FROM APPROVED SOURCE

- ☐ 4. Food and Water from Approved Source
☐ 5. Receiving / Condition
☐ 6. Tags / Records / Accuracy of Ingredient Statements
☐ 7. Conformance with Approved Procedures / HACCP Plans

PROTECTION FROM CONTAMINATION

- ☐ 8. Separation / Segregation / Protection
☐ 9. Food Contact Surfaces Cleaning and Sanitizing
☐ 10. Proper Adequate Handwashing
☐ 11. Good Hygienic Practices

- ☐ 12. Prevention of Contamination from Hands

- ☐ 13. Handwash Facilities

PROTECTION FROM CHEMICALS

- ☐ 14. Approved Food or Color Additives
☐ 15. Toxic Chemicals

TIME/TEMPERATURE CONTROLS (Potentially Hazardous Foods)

- ☐ 16. Cooking Temperatures
☐ 17. Reheating
☐ 18. Cooling
☒ 19. Hot and Cold Holding

- ☐ 20. Time as a Public Health Control

REQUIREMENTS FOR HIGHLY SUSCEPTIBLE POPULATIONS (HSP)

- ☐ 21. Food and Food Preparation for HSP

CONSUMER ADVISORY

- ☐ 22. Posting of Consumer Advisories

Violations Related to Good Retail Practices (Blue Items)

Critical (C) violations marked must be corrected immediately or within 10 days as determined by the Board of Health. Non-critical (N) violations must be corrected immediately or within 90 days as determined by the Board of Health.

| C | N |
|---|---|
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| | |

23. Management and Personnel (FC-2)(590.003)
 24. Food and Food Protection (FC-3)(590.004)
 25. Equipment and Utensils (FC-4)(590.005)
 26. Water, Plumbing and Waste (FC-5)(590.006)
 27. Physical Facility (FC-6)(590.007)
 28. Poisonous or Toxic Materials (FC-7)(590.008)
 29. Special Requirements (590.009)
 30. Other

Number of Violated Provisions Related To Foodborne Illnesses Interventions and Risk Factors (Red Items 1-22):

1

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CORRECT BY:

| | | |
|--|------------------------------|----------------------------------|
| Inspector's Signature: <u>Deborah Rosati</u> | Print: <u>DEBORAH ROSATI</u> | Page <u>1</u> of <u> </u> Pages |
| PIC's Signature: <u>James McCarthy</u> | Print: <u>JAMES MCCARTHY</u> | |



THE COMMONWEALTH OF MASSACHUSETTS

CITY / TOWN of

Lynnfield

Board of Health

FOOD ESTABLISHMENT INSPECTION REPORT

Phone: 781-334-9481

| | | | | | |
|------------------------|---|------------|--------------|--|---|
| Name | Summer Street School | Date | 10/17/18 | Type of Operation(s) | Type of Inspection |
| Address | 265 Summer St | Risk Level | | <input checked="" type="checkbox"/> Food Service | <input checked="" type="checkbox"/> Routine |
| Telephone | 781-334-7223 | | | <input type="checkbox"/> Retail | <input type="checkbox"/> Re-inspection |
| Owner | J McCarthy for Lynnfield Public Schools | HACCP Y/N | | <input type="checkbox"/> Residential Kitchen | Previous Inspection Date: |
| Person in Charge (PIC) | Ann Mingolla 2020 Cert Y/N | Time | In: 10:15 am | <input type="checkbox"/> Mobile | <input type="checkbox"/> Pre-operation |
| Inspector | Justin McRae | Out: | 11:05 am | <input type="checkbox"/> Temporary | <input type="checkbox"/> Suspect Illness |
| | | | | <input type="checkbox"/> Caterer | <input type="checkbox"/> General Complaint |
| | | | | <input type="checkbox"/> Bed & Breakfast | <input type="checkbox"/> HACCP |
| | | | | Permit No. BHP-2018-0043 | <input type="checkbox"/> Other |

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Violations Related to Foodborne Illness Interventions and Risk Factors (Red Items)

Violations marked may pose an imminent health hazard and require immediate corrective action as determined by the Board of Health.

Non-compliance with:

- ☐ Anti-Choking 590.009 (E)
- ☐ Tobacco 590.009 (F)
- ☐ Allergen Awareness 590.009 (G)
- ☐ Local Law

FOOD PROTECTION MANAGEMENT

- ☐ 1. PIC Assigned / Knowledgeable / Duties

EMPLOYEE HEALTH

- ☐ 2. Reporting of Diseases by Food Employee and PIC
- ☐ 3. Personnel with Infections Restricted / Excluded

FOOD FROM APPROVED SOURCE

- ☐ 4. Food and Water from Approved Source
- ☐ 5. Receiving / Condition
- ☐ 6. Tags / Records / Accuracy of Ingredient Statements
- ☐ 7. Conformance with Approved Procedures / HACCP Plans

PROTECTION FROM CONTAMINATION

- ☐ 8. Separation / Segregation / Protection
- ☐ 9. Food Contact Surfaces Cleaning and Sanitizing
- ☐ 10. Proper Adequate Handwashing
- ☐ 11. Good Hygienic Practices

- ☐ 12. Prevention of Contamination from Hands

- ☐ 13. Handwash Facilities

PROTECTION FROM CHEMICALS

- ☐ 14. Approved Food or Color Additives
- ☐ 15. Toxic Chemicals

TIME/TEMPERATURE CONTROLS (Potentially Hazardous)

- ☐ 16. Cooking Temperatures
- ☐ 17. Reheating
- ☐ 18. Cooling
- ☐ 19. Hot and Cold Holding
- ☐ 20. Time as a Public Health Control

REQUIREMENTS FOR HIGHLY SUSCEPTIBLE POPULATIONS (HSP)

- ☐ 21. Food and Food Preparation for HSP

CONSUMER ADVISORY

- ☐ 22. Posting of Consumer Advisories

Violations Related to Good Retail Practices (Blue Items)

Critical (C) violations marked must be corrected immediately or within 10 days as determined by the Board of Health. Non-critical (N) violations must be corrected immediately or within 90 days as determined by the Board of Health.

| C | N | |
|---|---|--|
| | | 23. Management and Personnel (FC-2)(590.003) |
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| | | 25. Equipment and Utensils (FC-4)(590.005) |
| 1 | 1 | 26. Water, Plumbing and Waste (FC-5)(590.006) |
| | 1 | 27. Physical Facility (FC-6)(590.007) |
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Number of Violated Provisions Related To Foodborne Illnesses Interventions and Risk Factors (Red Items 1-22):

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CORRECT BY:

| | | |
|-------------------------------------|---------------------|-------------------|
| Inspector's Signature: Justin McRae | Print: Justin McRae | Page 1 of 2 Pages |
| PIC's Signature: Ann Mingolla | Print: Ann Mingolla | |

Summer Street School
Visitor



FOOD ESTABLISHMENT INSPECTION REPORT

Phone:

781-334-9480

| | | | | | |
|------------------------|------------------------------------|------------|----------|--|---|
| Name | Summer Street School | Date | 3/29/19 | Type of Operation(s) | Type of Inspection |
| Address | 262 Summer St | Risk Level | | <input checked="" type="checkbox"/> Food Service | <input checked="" type="checkbox"/> Routine |
| Telephone | 781-334-7223 | | | <input type="checkbox"/> Retail | <input type="checkbox"/> Re-inspection |
| Owner | JM McCarthy & Lynnfield Public Sch | HACCP Y/N | | <input type="checkbox"/> Residential Kitchen | Previous Inspection Date: |
| Person in Charge (PIC) | | Cert. Y/N | | <input type="checkbox"/> Mobile | <input type="checkbox"/> Pre-operation |
| Inspector | DEBORAH ROSATI, MS, RC | Time In: | 10:00 am | <input type="checkbox"/> Temporary | <input type="checkbox"/> Suspect Illness |
| | | Time Out: | | <input type="checkbox"/> Caterer | <input type="checkbox"/> General Complaint |
| | | | | <input type="checkbox"/> Bed & Breakfast | <input type="checkbox"/> HACCP |
| | | | | Permit No. | <input type="checkbox"/> Other |

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Ssn: Ann Mingola to 2020

Violations Related to Foodborne Illness Interventions and Risk Factors (Red Items)

Violations marked may pose an imminent health hazard and require immediate corrective action as determined by the Board of Health.

A. Awareness: ☒ poster ☒ menu ☒ cert MAY 2, 2018

Non-compliance with:

- ☐ Anti-Choking 590.009 (E)
☐ Tobacco 590.009 (F)
☐ Allergen Awareness 590.009 (G)
☐ Local Law

FOOD PROTECTION MANAGEMENT

- ☐ 1. PIC Assigned / Knowledgeable / Duties

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CONSUMER ADVISORY

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| | | 24. Food and Food Protection (FC-3)(590.004) |
| | | 25. Equipment and Utensils (FC-4)(590.005) |
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| | | 27. Physical Facility (FC-6)(590.007) |
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| | | 30. Other |

Number of Violated Provisions Related To Foodborne Illnesses Interventions and Risk Factors (Red Items 1-22):



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CORRECT BY:

| | | |
|--|-----------------------|-------------------|
| Inspector's Signature: <i>Deborah Rosati</i> | Print: DEBORAH ROSATI | Page 1 of 2 Pages |
| PIC's Signature: <i>Ann Mingola</i> | Print: ANN MINGOLA | |



TOWN OR CITY OF

LYNNFIELD

Establishment Name:

SUMMER ST. SCHOOL

Date:

3/29/19

Page:

2 of 2

| Item No. | Code Reference | C - Critical Item R - Red Item | DESCRIPTION OF VIOLATION / PLAN OF CORRECTION <small>PLEASE PRINT CLEARLY</small> | Date Verified |
|--|----------------|-----------------------------------|--|---|
| | | | NOTE ENSURE ALL FROZEN PREPARED FOODS SUCH AS 5" MAX PIZZAS ARE COOKED TO SPECIFICATION ON BOXES (165°F ON PIZZA). | |
| | | NOTE | SEVSAFE - ANN MINGOLLA, ROBIN BRIGHAM, DOB 9/23/2009. | |
| | | NOTE | DISHMACHINE NOT BEING USED. SINK BAY SANITIZER AND SPRAY BOTTLE AT 200 PPM. | |
| | | NOTE | EXHAUST HOOD CLEANED 2/22/19 | |
| 254-101111 | | | - CLEAN EXHAUST HOOD FILTERS TO REMOVE DUST (DONE ONCE/YEAR - RECOMMEND 2X) | |
| | | NOTE | HAND SINKS - HOT WATER, SOAP, PAPER TOWELS, SIGNS. DUMPSTER AREA CLEAN | |
| 254 | | NOTE | - REMOVE LEAF ACCUMULATION FROM BASEMENT STAIR LANDING NEXT TO DUMPSTER AREA. | |
| | | NOTE | SAL'S PIZZA, SALAD ON MENU | |
| | | NOTE | TRAVELER REFRIGERATOR 36°F. FREEZER 10°F. WAX IN COOLER 34°F. | |
| Discussion With Person in Charge: | | | | |
| Inspector's Signature: <i>Deborah Rosati</i> | | | Corrective Action Required: | <input type="checkbox"/> No <input type="checkbox"/> Yes |
| PIC's Signature: <i>Ann Mingolla</i> | | | <input type="checkbox"/> Voluntary Compliance | <input type="checkbox"/> Employee Restriction / Exclusion |
| | | | <input type="checkbox"/> Re-inspection Scheduled | <input type="checkbox"/> Emergency Suspension |
| | | | <input type="checkbox"/> Embargo | <input type="checkbox"/> Emergency Closure |
| | | | <input type="checkbox"/> Voluntary Disposal | <input type="checkbox"/> Other: |