

Uxbridge High School
300 Quaker Highway
Uxbridge, MA 01569

<u>Inspection Number</u>	83653	<u>Date</u>	9/29/23	<u>Time In/Out</u>	8:07 AM 8:55 AM	<u>Inspection Type</u>	Routine	<u>Client Type</u>	Institutional	<u>Inspector</u>	K.Donahue
<u>Permit Number</u>	36=2023	<u>Risk</u>		<u>Variance</u>		<u>Rating</u>	Excellent	<u>Score</u>	99	<u>Priority</u>	0
								<u>Pf</u>	0	<u>Core</u>	1

Foodborne Illness Risk Factors and Public Health Interventions

IN = in compliance OUT= out of compliance N/O = not observed N/A = not applicable COS = corrected on-site during inspection Repeat Violations Highlighted in Yellow

Supervision	IN	OUT	NA	NO	COS	Protection from Contamination (Cont'd)	IN	OUT	NA	NO	COS
1. PIC present, demonstrates knowledge, and performs duties	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	15. Food separated and protected	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. Certified Food Protection Manager	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	16. Food-contact surfaces; cleaned & sanitized	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Employee Health						Time/Temperature Control for Safety					
3. Management, food employee and conditional employee knowledge, responsibilities and reporting	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	17. Proper disposition of returned, previously served,	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4. Proper use of restriction and exclusion	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	18. Proper cooking time & temperatures	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5. Procedures for responding to vomiting and diarrheal events	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	19. Proper reheating procedures for hot holding	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Good Hygienic Practices						Consumer Advisory					
6. Proper eating, tasting, drinking, or tobacco use	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	20. Proper cooling time and temperature	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7. No discharge from eyes, nose, and mouth	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	21. Proper hot holding temperatures	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Preventing Contamination by Hands						Highly Susceptible Populations					
8. Hands clean & properly washed	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	22. Proper cold holding temperatures	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9. No bare hand contact with RTE food or a pre-approved	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	23. Proper date marking and disposition	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10. Adequate handwashing sinks supplied and accessible	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	24. Time as a Public Health Control; procedures & records	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Approved Source						Food/Color Additives and Toxic Substances					
11. Food obtained from approved source	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	25. Consumer advisory provided for raw/undercooked food	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
12. Food received at proper temperature	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	26. Pasteurized foods used; prohibited foods not offered	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
13. Food in good condition, safe & unadulterated	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	27. Food additives: approved & properly used	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
14. Required records available: shellstock tags, parasite	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	28. Toxic substances properly identified, stored & used	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Conformance with Approved Procedures						Physical Facilities					
Repeat Violations Highlighted in Yellow						29. Compliance with variance/specialized process/HACCP	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Good Retail Practices

Safe Food and Water	IN	OUT	NA	NO	COS	Proper Use of Utensils	IN	OUT	NA	NO	COS
30. Pasteurized eggs used where required	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	43. In-use utensils: properly stored	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
31. Water & ice from approved source	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	44. Utensils, equip. & linens: property stored, dried & handled	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
32. Variance obtained for specialized processing methods	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	45. Single-use/single-service articles: properly stored & used	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Food Temperature Control						Utensils, Equipment and Vending					
33. Proper cooling methods used; adequate equip. for temp.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	46. Gloves used properly	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
34. Plant food properly cooked for hot holding	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	47. All contact surfaces cleanable, properly designed,	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
35. Approved thawing methods used	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	48. Warewashing facilities: installed, maintained & used; test	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
36. Thermometers provided & accurate	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	49. Non-food contact surfaces clean	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Food Identification						Physical Facilities					
37. Food properly labeled; original container	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	50. Hot & cold water available; adequate pressure	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Prevention of Food Contamination						Physical Facilities					
38. Insects, rodents & animals not present	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	51. Plumbing installed; proper backflow devices	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
39. Contamination prevented in prep, storage & display	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	52. Sewage & waste water properly disposed	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
40. Personal cleanliness	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	53. Toilet facilities: properly constructed, supplied, & cleaned	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
41. Wiping cloths; properly used & stored	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	54. Garbage & refuse properly disposed; facilities maintained	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
42. Washing fruits & vegetables	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	55. Physical facilities installed, maintained & clean	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
						56. Adequate ventilation & lighting; designated areas use	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
						60. 105 CMR 590 violations / local regulations	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Official Order for Correction: Based on an inspection today, the items marked "OUT" indicated violations of 105 CMR 590.000 and applicable sections of the 2013 FDA 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 you are subject to a notice of suspension, revocation, or non-renewal

K. Donahue

K. Donahue

Janice Ouellette

Janice Ouellette - Expires
Certificate #:

Follow Up Required: Y Follow Up Date: _____

FOOD SAFETY INSPECTION REPORT

Uxbridge High School
300 Quaker Highway
Uxbridge, MA 01569

Inspection Number
83653

Date
9/29/23

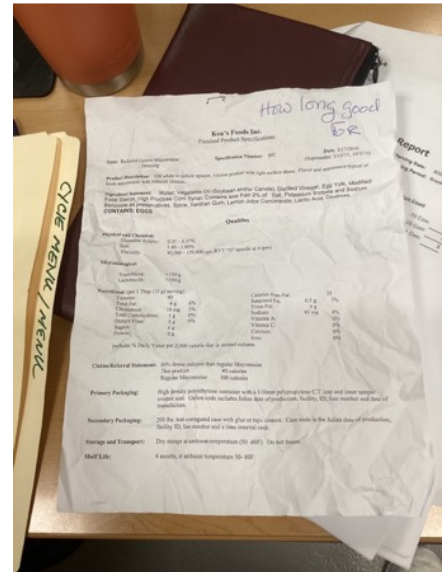
Time In/Out
8:07 AM
8:55 AM

Inspector
K. Donahue

Inspection Report (Continued)

Repeat Violations Highlighted in Yellow

88 - -
-



Physical Facilities

FOOD SAFETY INSPECTION REPORT

Page Number

3

Uxbridge High School
300 Quaker Highway
Uxbridge, MA 01569

Inspection Number
83653

Date
9/29/23

Time In/Out
8:07 AM
8:55 AM

Inspector
K.Donahue

Inspection Report (Continued)

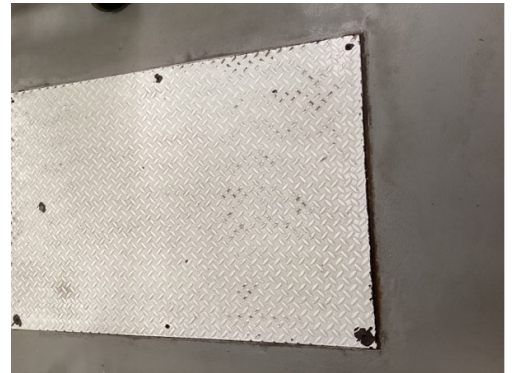
Repeat Violations Highlighted in Yellow

Physical Facilities installed, maintained & cleaned

55

6-501.11 Repairing - Kitchen -

- C** Please replace all fasteners on the grease trap and ensure that the cover is secure and has a tight seal.
Code: The physical facilities shall be maintained in good repair.



Notes

FOOD SAFETY INSPECTION REPORT

Uxbridge High School
300 Quaker Highway
Uxbridge, MA 01569

Inspection Number
83653

Date
9/29/23

Time In/Out
8:07 AM
8:55 AM

Inspector
K.Donahue

Inspection Report (Continued)

Repeat Violations Highlighted in Yellow

Notes

- 88 **Notes - Kitchen -**
N New equipment - General Notes.



- 88 **Notes - Kitchen -**
N New equipment - General Notes.



FOOD SAFETY INSPECTION REPORT

Uxbridge High School
300 Quaker Highway
Uxbridge, MA 01569

Inspection Number
83653

Date
9/29/23

Time In/Out
8:07 AM
8:55 AM

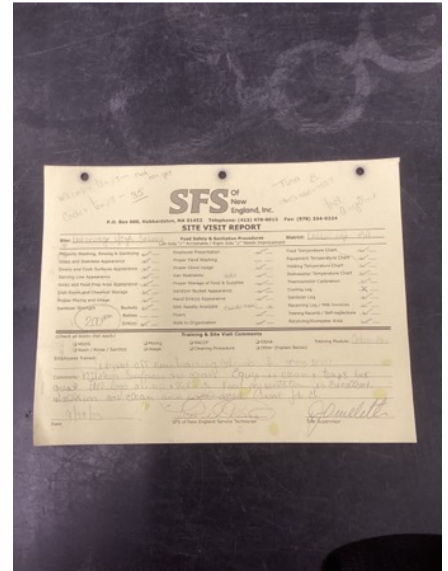
Inspector
K.Donahue

Inspection Report (Continued)

Repeat Violations Highlighted in Yellow

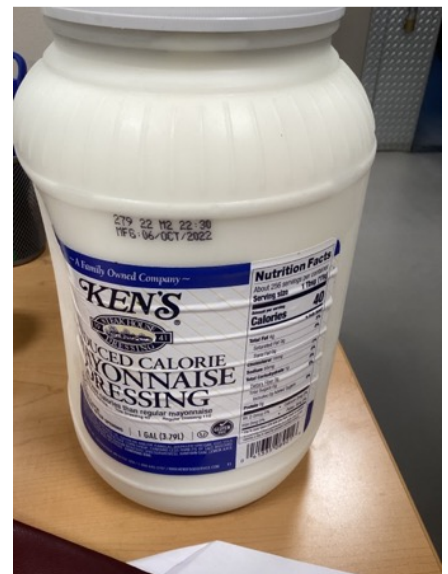
88 Notes - Kitchen -

- N Report from SFS-company that provides all sanitizers - General Notes.



88 Notes - -

- N Staff would like to know what is best practices for dates - General Notes.



List 1

IN= In Compliance **OUT** = Out of Compliance NA = Not Applicable NO= Not Observed

FOOD SAFETY INSPECTION REPORT

Uxbridge High School
300 Quaker Highway
Uxbridge, MA 01569

Inspection Number
83653

Date
9/29/23

Time In/Out
8:07 AM
8:55 AM

Inspector
K.Donahue

Inspection Report (Continued)

Repeat Violations Highlighted in Yellow

PIC on -site?	IN
PIC informed employees in verifiable manner of disease reporting	IN
Employees using barrier (I.e gloves, tongs, etc) when handling RTE foods?	IN
Employees eating/drinking in designated areas only. Drinks stored properly?	IN
Employees wearing clean uniform/proper hair restraints/fingernails maintained?	IN
Hand washing sinks have soap, paper towels, 100 water and trash bin?	IN
Wiping cloths stored properly and staff knowledgeable on testing	IN
Soap and sanitizing solutions at concentration and test strips available?	IN
Thermometers in all temperature holding units and available for testing food?	IN
Dish machines are working properly (wash temp/solutions per manufacturer)?	IN
Test strips and irreversible temp. devices used to confirm proper sanitization?	IN
Food deliveries are from approved sources, safely stored and transported?	IN
TCS / RTE foods are properly date marked?	IN
Clean-up of vomit and diarrheal events procedures and kit available?	IN

List 2

IN= In Compliance **OUT** = Out of Compliance NA = Not Applicable NO= Not Observed

"A copy of the last inspection report is available upon request."	IN
Allergen Awareness Poster	IN
Allergen Notice on menu and/or menu board	IN
Current Town of Uxbridge Food Permit posted	IN
Certified Food Protection Manager certificate posted	IN
Allergen Awareness certificate posted	IN
Handwashing signage	IN

Temperatures

Area	Equipment	Product	Notes	Temps
Establishment	Misc- reach in			35 °F

FOOD SAFETY INSPECTION REPORT

Uxbridge High School
300 Quaker Highway
Uxbridge, MA 01569

Inspection Number
83653

Date
9/29/23

Time In/Out
8:07 AM
8:55 AM

Inspector
K.Donahue

Inspection Report (Continued)

Repeat Violations Highlighted in Yellow

Establishment	Misc.	Dishwasher		
Kitchen	Walk-in Cooler			160 °F
Kitchen	Walk in freezer			36 °F
Kitchen	Dry Storage			3 °F
Kitchen	Misc- reach in			60 °F
Kitchen	Misc- reach in			36 °F
Kitchen	Misc- reach in			35 °F
Kitchen	Misc- reach in			39 °F

Temperatures in **RED** identify items in the temperature danger zone. See the report notes for specific details.

Notes

Everything looks great. All dates and temps are within range. Both grease trap covers need to be repaired so all fasteners are intact and cover is tight fitting and sealed properly.