

## Food Premises Inspection Report

<b>Name of Premise:</b> YMCA Forest Glen Community Centre  <b>Operator:</b> Heather Oldfield  <b>Address:</b> 651 Westmorland Rd Saint John NB E2J 2H3	<b>Licence #:</b> 02-02230  <b>Type:</b> Class/Classe 4  <b>Category:</b> Compliance  <b>Water Supply:</b> Municipal  <b>Date of Inspection:</b> May 5, 2022
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Item no.	Description	CDI	R
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### 1.0 FOOD

1.1	S	Approved Source	<input type="checkbox"/>	<input type="checkbox"/>
1.2	N.O.	Purchasing and Receiving	<input type="checkbox"/>	<input type="checkbox"/>
1.3	N.O.	Acceptable Containers and Labeling	<input type="checkbox"/>	<input type="checkbox"/>

### 2.0 FOOD STORAGE

2.1	S	Storage of Potentially Hazardous Foods	<input type="checkbox"/>	<input type="checkbox"/>
2.2	S	Frozen Storage	<input type="checkbox"/>	<input type="checkbox"/>
2.3	U	Refrigerated Storage (Temperature)	<input checked="" type="checkbox"/>	<input type="checkbox"/>
2.4	S	Refrigerated Storage (Methods)	<input type="checkbox"/>	<input type="checkbox"/>
2.5	S	Refrigerated Storage (Space)	<input type="checkbox"/>	<input type="checkbox"/>
2.6	S	Dry Storage	<input type="checkbox"/>	<input type="checkbox"/>
2.7	N.O.	Storage of Food for Staff	<input type="checkbox"/>	<input type="checkbox"/>

### 3.0 FOOD PREPARATION AND HANDLING

3.1	N.O.	Thawing Methods	<input type="checkbox"/>	<input type="checkbox"/>
3.2	N.O.	Cooking Methods	<input type="checkbox"/>	<input type="checkbox"/>
3.3	N.O.	Holding Methods	<input type="checkbox"/>	<input type="checkbox"/>
3.4	N.O.	Cooling Methods	<input type="checkbox"/>	<input type="checkbox"/>
3.5	N.O.	Re-heating Methods	<input type="checkbox"/>	<input type="checkbox"/>
3.6	N.O.	Handling Methods	<input type="checkbox"/>	<input type="checkbox"/>

### 4.0 FOOD DISPLAY AND SERVICE

4.1	N.O.	Display Methods	<input type="checkbox"/>	<input type="checkbox"/>
4.2	N.O.	Advance Preparation	<input type="checkbox"/>	<input type="checkbox"/>

### 5.0 RECORD KEEPING AND RECALLS

5.1	N.O.	Record Keeping	<input type="checkbox"/>	<input type="checkbox"/>
5.2	N.O.	Recall of Food	<input type="checkbox"/>	<input type="checkbox"/>

### 6.0 PERSONNEL

6.1	S	Demonstrating Knowledge	<input type="checkbox"/>	<input type="checkbox"/>
6.2	S	Employee Health	<input type="checkbox"/>	<input type="checkbox"/>
6.3	S	Personal Hygiene Practices	<input type="checkbox"/>	<input type="checkbox"/>

### 7.0 FOOD EQUIPMENT AND UTENSILS

7.1	S	Food Equipment (Design, Construction, Installation and Maintenance)	<input type="checkbox"/>	<input type="checkbox"/>
7.2	S	Food Contact Surfaces	<input type="checkbox"/>	<input type="checkbox"/>
7.3	N.O.	Mechanical Dishwashing	<input type="checkbox"/>	<input type="checkbox"/>
7.4	S	Manual Dishwashing	<input type="checkbox"/>	<input type="checkbox"/>

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7.5	S	Eating Utensils and Dishes	<input type="checkbox"/>	<input type="checkbox"/>
<b>8.0 CLEANING AND SANITIZING</b>				
8.1	S	Cleaning and Sanitizing	<input type="checkbox"/>	<input type="checkbox"/>
8.2	S	Detergents and Chemical Use and Storage	<input type="checkbox"/>	<input type="checkbox"/>
<b>9.0 SANITARY FACILITIES</b>				
9.1	S	Washroom(s)	<input type="checkbox"/>	<input type="checkbox"/>
9.2	S	Hand Washing Station(s)	<input type="checkbox"/>	<input type="checkbox"/>
<b>10.0 FLOORS, WALLS AND CEILINGS</b>				
10.1	S	Floors (Construction and Maintenance)	<input type="checkbox"/>	<input type="checkbox"/>
10.2	S	Walls (Construction and Maintenance)	<input type="checkbox"/>	<input type="checkbox"/>
10.3	S	Ceilings (Constructions and Maintenance)	<input type="checkbox"/>	<input type="checkbox"/>
<b>11.0 WATER SUPPLY AND WASTE DISPOSAL</b>				
11.1	S	Water (Quality and Quantity)	<input type="checkbox"/>	<input type="checkbox"/>
11.2	S	Sewage Disposal	<input type="checkbox"/>	<input type="checkbox"/>
11.3	S	Solid Waste Handling	<input type="checkbox"/>	<input type="checkbox"/>
<b>12.0 LIGHTING AND VENTILATION</b>				
12.1	S	Lighting	<input type="checkbox"/>	<input type="checkbox"/>
12.2	S	Ventilation	<input type="checkbox"/>	<input type="checkbox"/>
<b>13.0 GENERAL</b>				
13.1	S	Licence	<input type="checkbox"/>	<input type="checkbox"/>
13.2	N.O.	Rodent and Insect Control	<input type="checkbox"/>	<input type="checkbox"/>
13.3	N.O.	Other Infractions/Hazards	<input type="checkbox"/>	<input type="checkbox"/>

*N.O. - Not Observed; S - Satisfactory; U - Unsatisfactory MI - Minor infraction; MA - Major infraction; CR - Critical infraction, CDI - Corrected During Inspection, R - Repeated infraction*

### OBSERVATIONS AND CORRECTIVE ACTIONS

Item	MI /MA/ CR	Remarks	Date for Correction
2.3	MI	Temperatures shall be recorded at least 2 times daily at acceptable intervals during operation and logs shall be easily accessible for review by inspectors  <b>Observations: temperatures were not recorded for the month of April up to May 5, 2022</b> <b>Corrective Actions: Staff member, Heather Oldfield placed a new form on the clipboard and took temperature of the fridge during inspection</b>	Corrected

### CLOSING COMMENTS

Rating color: Green

Received

Inspector