

Establishment Name <u>Anna's College Cuntina</u>		Permit Number: <u>Applied</u>	
Mailing Address <u>Box 1171, Fort Smith, NT X0E 0P0</u>		Permit Posted: <input type="checkbox"/> Yes <input type="checkbox"/> No	
Physical Address <u>50 Conibear Cres, FS, NT X0E 0P0</u>		Date of Inspection: (d/m/y)	<u>28/01/2020</u>
Routine Inspection <input checked="" type="checkbox"/>	Complaint <input type="checkbox"/>	Follow-up Inspection <input type="checkbox"/>	If follow-up, date of previous inspection (d/m/y) ; _____

CRITICAL ITEMS: Based on the inspection today, the critical items identified below are violations of the Food Establishment Safety Regulations. Critical items must be corrected at the time of inspection or controlled in a manner that will not pose a food safety threat. Failure to immediately correct or control critical items may result in revocation or suspension of your Food Establishment Permit and closure of your establishment.

LEGEND		Circle One of:	YES (in compliance)	NOB (not observed)	NO (not in compliance)	NA (not applicable)	Mark "✓" in Box:	R (repeat violation)	CDI (controlled during inspection)
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Compliance Status				CDI	R		
Time/Temperature of Potentially Hazardous Foods							
101	Cold holding temperatures ≤ 4°C	<u>YES</u>	NO	NA	NOB		
102	Hot holding temperatures ≥ 60°C	<u>YES</u>	NO	NA	NOB		
103	Proper cooking of raw food of animal origin	<u>YES</u>	NO	NA	NOB		
104	Proper cooling time and temperatures	<u>YES</u>	NO	NA	NOB		
105	Adequate equipment to maintain food temperatures	<u>YES</u>	NO	NA	NOB		
106	Proper monitoring of temperatures	<u>YES</u>	NO	NA	NOB		
107	Proper reheating procedures for hot holding	<u>YES</u>	NO	NA	NOB		
108	Proper thawing procedures	<u>YES</u>	NO	NA	NOB		
Food, Water and Ice from Approved Sources							
301	Food obtained from approved sources	<u>YES</u>	<u>NO</u>	NA	NOB		
302	Food in good condition, safe and unaltered	<u>YES</u>	NO	NA	NOB		
303	Food properly labeled	<u>YES</u>	NO	NA	NOB		

Compliance Status				CDI	R		
Personal Hygiene of Food Service Workers							
201	Hands clean & properly washed	<u>YES</u>	NO	NA	NOB		
202	Adequate handwashing facilities supplied & accessible	<u>YES</u>	NO	NA	NOB		
203	Food handlers free of disease or condition that may spread through food	<u>YES</u>	NO	NA	NOB		
204	Food handlers using proper utensils to avoid unnecessary hand contact with cooked/prepared food	<u>YES</u>	NO	NA	NOB		
205	Food training certification	<u>YES</u>	NO	NA	NOB		
Potentially Hazardous Foods Protected from Contamination							
401	Food separated and protected	<u>YES</u>	NO	NA	NOB		
402	Food contact surfaces cleaned and sanitized	<u>YES</u>	NO	NA	NOB		
403	Facility free of pests (vermin and insects)	<u>YES</u>	NO	NA	NOB		
404	Toxic chemicals properly labeled, stored or used to prevent food contamination	<u>YES</u>	NO	NA	NOB		
405	Proper disposal of returned, previously served food	<u>YES</u>	NO	NA	NOB		

Food Temperature Observations					
Item / Location	Temp (°C)	Item / Location	Temp (°C)	Item / Location	Temp (°C)
Hot - display	63				
Deep freezer	-20				
cooler - back	3.2				
Glass door cooler	3.8				

Item Number	Observations and Corrective Actions	Correction Date (if applicable)
108	EHO observed frozen meat being thawed at room temperature on the counter. The operator must ensure proper thawing procedure used. EHO required operator to properly place partially thawed food as ice crystals still present in food.	28/01/2020
301	The operator sells home-prepared 'chaga' at the premises. As per the Food Establishment Safety Regulation, all food in a food premises must be acquired from approved sources or prepared in inspected facility. EHO requires that the operator must prepare all food items in inspected food establishment.	28/1/2020

NON-CRITICAL ITEMS: Based on the inspection today, the non-critical items identified below are violations of the Food Establishment Safety Regulations. Non-critical items must be corrected by the next routine inspection or a shorter period of time as may be specified by the inspector. Failure to comply with any time limits for corrections specified in this notice may result in revocation or suspension of your Food Establishment Permit and closure of your establishment.

LEGEND		Circle One of:		YES (in compliance) NO (not in compliance)		NOB (not observed) NA (not applicable)		Mark "✓" in Box:		R (repeat violation) CDI (controlled during inspection)					
Compliance Status						CDI	R	Compliance Status				CDI	R		
Food Equipment and Utensils								Physical Facilities							
501	Adequate facilities available to wash, rinse and sanitize utensils and/or equipment.	YES	NO	NA	NOB			601	Food contact surfaces properly constructed or located. Acceptable material used.	YES	NO	NA	NOB		
502	Appropriate procedures followed for mechanical and/or manual dishwashing	YES	NO	NA	NOB			602	Hot & cold water available; adequate pressure	YES	NO	NA	NOB		
503	Proper storage of frozen food items	YES	NO	NA	NOB			603	Proper disposal of sewage & waste water	YES	NO	NA	NOB		
504	Food stored in food grade material	YES	NO	NA	NOB			604	Toilet facilities: adequate number, properly constructed, supplied and cleaned	YES	NO	NA	NOB		
505	Equipment and utensils that contact food are corrosion resistant and non-toxic	YES	NO	NA	NOB			605	Adequate lighting; lighting protected	YES	NO	NA	NOB		
506	Equipment in good repair, cleaned and sanitized	YES	NO	NA	NOB			606	Adequate mechanical ventilation;	YES	NO	NA	NOB		
General Sanitation								607	Premises clean, uncluttered, cleaning and maintenance equipment properly stored	YES	NO	NA	NOB		
701	Garbage & refuse properly disposed and facilities maintained	YES	NO	NA	NOB			Testing Devices/Logging of Temperatures							
702	Non-food contact surfaces properly constructed, in good repair and clean	YES	NO	NA	NOB			801	Working dishwasher temperature and pressure gauges	YES	NO	NA	NOB		
703	Food handlers properly attired and good personal hygiene	YES	NO	NA	NOB			802	Chemical test kits and/ or papers provided	YES	NO	NA	NOB		
704	Adequate protection from vermin and insect pests	YES	NO	NA	NOB			803	Temperature logs maintained for refrigerated storage units (non-regulatory requirement)	YES	NO	NA	NOB		
705	Living or sleeping quarters separated from food service area	YES	NO	NA	NOB			Other							
706	Birds or animals other than guide dogs excluded from premises	YES	NO	NA	NOB										
707	Wiping cloths used properly and stored in sanitizing solution	YES	NO	NA	NOB										

Item Number	Observations and Corrective Actions	Correction Date (If applicable)
607	The premises in need of proper cleaned and organisations. Lot of dirt, food particles, and grease accumulated on the floor. EHO requires that operator maintain sanitary condition of the premises.	28/3/2020
	Most of food preparation done at 'Anna's Home Cooking' and brought over to the facility for hot holding.	

Enforcement Action: (Mark "✓", if Applicable)			
Re-Inspection Required:	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>	Establishment Closed
Approximate Date of Re-Inspection:			Food Discarded <input type="checkbox"/>
			Other <input type="checkbox"/>

Person in Charge Name: Anna Kikoak	Environmental Health Officer Name: Chiray Rohit
Person in Charge Signature:	Environmental Health Officer Signature:
Date (d/m/y): 28/01/2020.	Date (d/m/y): 28/01/2020