

Establishment Name: <i>Avens-Community for Seniors</i>		Permit Number: <i>4700</i>
Mailing Address:		Permit Posted: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Physical Address: <i>1-5710-50<sup>th</sup> Ave. Yellowknife</i>		Date of Inspection: <i>30/11/2020</i> (d/m/y)
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) Mark "✓" in Box: R (repeat violation) CDI (controlled during inspection)  
 NO (not in compliance) NA (not applicable)

Compliance Status		CDI	R	Compliance Status		CDI	R
<b>Time/Temperature of Potentially Hazardous Foods</b>				<b>Personal Hygiene of Food Service Workers</b>			
101	Cold holding temperatures ≤ 4°C	<u>YES</u>	NO NA NOB	201	Hands clean & properly washed	<u>YES</u>	NO NOB
102	Hot holding temperatures ≥ 60°C	YES	<u>NO</u> NA NOB	202	Adequate handwashing facilities supplied & accessible	<u>YES</u>	NO NOB
103	Proper cooking of raw food of animal origin	<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
104	Proper cooling time and temperatures	<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
105	Adequate equipment to maintain food temperatures	<u>YES</u>	NO NA NOB	205	Food training certification	<u>YES</u>	NO NA NOB
106	Proper monitoring of temperatures	<u>YES</u>	NO NA NOB	<b>Potentially Hazardous Foods Protected from Contamination</b>			
107	Proper reheating procedures for hot holding	<u>YES</u>	NO NA NOB	401	Food separated and protected	<u>YES</u>	NO NA NOB
108	Proper thawing procedures	<u>YES</u>	NO NA NOB	402	Food contact surfaces cleaned and sanitized	<u>YES</u>	NO NA NOB
<b>Food, Water and Ice from Approved Sources</b>				403	Facility free of pests (vermin and insects)	<u>YES</u>	NO NOB
301	Food obtained from approved sources	<u>YES</u>	NO NOB	404	Toxic chemicals properly labeled, stored or used to prevent food contamination	<u>YES</u>	NO NOB
302	Food in good condition, safe and unaltered	<u>YES</u>	NO NOB	405	Proper disposal of returned, previously served food	<u>YES</u>	NO NOB
303	Food properly labeled	<u>YES</u>	NO NOB				

Food Temperature Observations			
Item / Location	Temp (°C)	Item / Location	Temp (°C)
<i>cold hold all</i>	<i>4</i>		
<i>Frozen hold</i>	<i>-16</i>		

Item Number	Observations and Corrective Actions	Correction Date (if applicable)

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

Item Number	Observations and Corrective Actions	Correction Date (if applicable)
	Dishwasher Rinse temp gauge 88°C, plate temp 73	

Enforcement Action: (Mark "✓", if Applicable)			
Re-Inspection Required:	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>	
Approximate Date of Re-Inspection:		Establishment Closed:	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
		Food Discarded:	Other _____
Person in Charge Name:	Lawrence Malague	Environmental Health Officer Name:	Colin Menez
Person in Charge Signature:		Environmental Health Officer Signature:	
Date (d/m/y)	30/11/2020	Date (d/m/y)	30/11/2020