

Establishment Name <u>Soup Kitchen</u>		Permit Number: <u>NT-13515</u>
Mailing Address		Permit Posted: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Physical Address <u>67 Woodland Drive, Hay River, NT</u>		Date of Inspection: (d/m/y) <u>Feb 1, 2023</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)	Mark "✓" in Box:		R (repeat violation)
		NO (not in compliance)	NA (not applicable)			CDI (controlled during inspection)

Compliance Status			CDI	R
Time/Temperature of Potentially Hazardous Foods				
101	Cold holding temperatures $\leq 4^{\circ}\text{C}$	<u>YES</u> NO NA NOB		
102	Hot holding temperatures $\geq 60^{\circ}\text{C}$	<u>YES</u> NO NA NOB		
103	Proper cooking of raw food of animal origin	YES NO NA <u>NOB</u>		
104	Proper cooling time and temperatures	YES NO NA <u>NOB</u>		
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 <u>NOB</u>		
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> NO NOB		
302	Food in good condition, safe and unaltered	<u>YES</u> NO NOB		
303	Food properly labeled	<u>YES</u> NO NOB		

Compliance Status			CDI	R
Personal Hygiene of Food Service Workers				
201	Hands clean & properly washed	YES NO <u>NOB</u>		
202	Adequate handwashing facilities supplied & accessible	<u>YES</u> NO 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 NOB		
404	Toxic chemicals properly labeled, stored or used to prevent food contamination	<u>YES</u> <u>NO</u> NOB		
405	Proper disposal of returned, previously served food	YES NO <u>NOB</u>		

Food Temperature Observations					
Item / Location	Temp (°C)	Item / Location	Temp (°C)	Item / Location	Temp (°C)
white freezer 1	-23.7	frigidare-freezer	-16.6	Frigidare freezer 2	-29.2
white freezer 2	-27.2	fridge	0.5	Soup (hot held)	60.0
True fridge	-4.4	frigidare: fridge			
whirlpool fridge	0.5	freezer 1	-19.9		

Item Number	Observations and Corrective Actions	Correction Date (if applicable)
	Routine inspection was conducted today and following was observed:-	
404	Bleach is being used as a food grade sanitizer. On verifying the strength of bleach solution, it was high. Education provided. The bleach solution bottle must be labelled properly.	
802	No test strips available at the time of inspection. Test strips must be available to verify the strength of sanitizer (bleach solution). Test strips provided.	

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	
Food Equipment and Utensils									
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	NA	NOB				
506	Equipment in good repair, cleaned and sanitized	YES	NO	NA	NOB				
General Sanitation									
701	Garbage & refuse properly disposed and facilities maintained	YES	NO	NA	NOB				
702	Non-food contact surfaces properly constructed, in good repair and clean	YES	NO	NA	NOB				
703	Food handlers properly attired and good personal hygiene	YES	NO	NA	NOB				
704	Adequate protection from vermin and insect pests	YES	NO	NA	NOB				
705	Living or sleeping quarters separated from food service area	YES	NO	NA	NOB				
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				
Physical Facilities									
601	Food contact surfaces properly constructed or located. Acceptable material used.	YES	NO	NA	NOB				
602	Hot & cold water available; adequate pressure	YES	NO	NA	NOB				
603	Proper disposal of sewage & waste water	YES	NO	NA	NOB				
604	Toilet facilities: adequate number, properly constructed, supplied and cleaned	YES	NO	NA	NOB				
605	Adequate lighting; lighting protected	YES	NO	NA	NOB				
606	Adequate mechanical ventilation;	YES	NO	NA	NOB				
607	Premises clean, uncluttered, cleaning and maintenance equipment properly stored	YES	NO	NA	NOB				
Testing Devices/Logging of Temperatures									
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				
Other									

[illegible]

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

Person in Charge Name:	Kim Tregidgo
Person in Charge Signature:	Kim Tregidgo
Date (d/m/y)	Feb 1 / 23

Environmental Health Officer Name:	RITH MATTOO
Environmental Health Officer Signature:	
Date (d/m/y)	Feb 1, 2023