

Failed  Closed  IHH

# State of Maine Health Inspection Report

Establishment Name <b>LISBON DONUTS INC</b>	As Authorized by 22 MRSA § 2496	Critical Violations	1	Date	1/6/2022
		Non-Critical Violations	3	Time In	2:40 PM
		Certified Food Protection Manager	E	Time Out	3:40 PM

License Expiry Date/EST. ID# 7/30/2021 / 23431	Address 828 LISBON ST	City LEWISTON	Zip Code 04240	Telephone 207-577-5995
License Type MUN - EATING PLACE	Owner Name LISBON DONUTS INC	Purpose of Inspection Regular	License Posted No	Risk Category Low

## FOODBORNE ILLNESS RISK FACTORS AND PUBLIC HEALTH INTERVENTIONS

Circle designated compliance status (IN, OUT, N/O, N/A) for each numbered item  
 IN=in compliance OUT=not in compliance N/O=not observed N/A=not applicable  
 Mark "X" in appropriate box for COS and/or R  
 COS=corrected on-site during inspection R=repeat violation

Compliance Status			COS	R	Compliance Status		COS	R
<b>Supervision</b>					<b>Potentially Hazardous Food Time/Temperature</b>			
1	IN	PIC present, demonstrates knowledge, and performs duties			16	IN	Proper cooking time & temperatures	
<b>Employee Health</b>					17	IN	Proper reheating procedures for hot holding	
2	IN	Management awareness: policy present			18	IN	Proper cooling time & temperatures	
3	IN	Proper use of reporting, restriction & exclusion			19	IN	Proper hot holding temperatures	
<b>Good Hygienic Practices</b>					20	IN	Proper cold holding temperatures	
4	IN	Proper eating, tasting, drinking, or tobacco use			21	IN	Proper date marking & disposition	
5	IN	No discharge from eyes, nose, and mouth			22	IN	Time as a public health control: procedures & record	
<b>Preventing Contamination by Hands</b>					<b>Consumer Advisory</b>			
6	OUT	Hands clean & properly washed		X	23	IN	Consumer advisory provided for raw or undercooked foods	
7	IN	No bare hand contact with RTE foods or approved alternate method properly followed			<b>Highly Susceptible Populations</b>			
8	OUT	Adequate handwashing facilities supplied & accessible	X	X	24	IN	Pasteurized foods used; prohibited foods not offered	
<b>Approved Source</b>					<b>Chemical</b>			
9	IN	Food obtained from approved source			25	IN	Food additives: approved & properly used	
10	IN	Food received at proper temperature			26	IN	Toxic substances properly identified, stored & used	
11	IN	Food in good condition, safe, & unadulterated			<b>Conformance with Approved Procedures</b>			
12	IN	Required records available: shellstock tags parasite destruction			27	IN	Compliance with variance, specialized process, & HACCP plan	
<b>Protection from Contamination</b>					<b>Risk Factors</b> are improper practices or procedures identified as the most prevalent contributing factors of foodborne illness or injury. Public Health Interventions are control measures to prevent foodborne illness or injury.			
13	IN	Food separated & protected						
14	IN	Food-contact surfaces: cleaned and sanitized						
15	IN	Proper disposition of returned, previously served, reconditioned, & unsafe food						

## GOOD RETAIL PRACTICES

Good Retail Practices are preventative measures to control the addition of pathogens, chemicals, and physical objects into foods.

Mark "X" in box if numbered item is not in compliance Mark "X" in appropriate box for COS and/or R COS=corrected on-site during inspection R=repeat violation

Compliance Status			COS	R	Compliance Status		COS	R
<b>Safe Food and Water</b>					<b>Proper Use of Utensils</b>			
28	IN	Pasteurized eggs used where required			41	IN	In-use utensils: properly stored	
29	IN	Water & ice from approved source			42	IN	Utensils, equipment, & linens: properly stored, dried, & handled	
30	IN	Variance obtained for specialized processing methods			43	IN	Single-use & single-service articles: properly stored & used	
<b>Food Temperature Control</b>					44	IN	Gloves used properly	
31	IN	Proper cooling methods used; adequate equipment for temperature control			<b>Utensils, Equipment and Vending</b>			
32	IN	Plant food properly cooked for hot holding			45	IN	Food & non-food contact surfaces cleanable, properly designed, constructed, & used	
33	IN	Approved thawing methods used			46	IN	Warewashing facilities: installed, maintained, & used; test strips	
34	X	Thermometers provided and accurate			47	X	Non-food contact surfaces clean	
<b>Food Identification</b>					<b>Physical Facilities</b>			
35	IN	Food properly labeled; original container			48	IN	Hot & cold water available; adequate pressure	
<b>Prevention of Food Contamination</b>					49	IN	Plumbing installed; proper backflow devices	
36	IN	Insects, rodents, & animals not present			50	IN	Sewage & waste water properly disposed	
37	IN	Contamination prevented during food preparation, storage & display			51	IN	Toilet facilities: properly constructed, supplied, & cleaned	
38	IN	Personal cleanliness			52	IN	Garbage & refuse properly disposed; facilities maintained	
39	IN	Wiping cloths: properly used & stored			53	IN	Physical facilities installed, maintained, & clean	
40	IN	Washing fruits & vegetables			54	IN	Adequate ventilation & lighting; designated areas used	

Person in Charge (Signature) <i>Samir...</i>	Date: 1/6/2022
Health Inspector (Signature) LOUIS LACHANCE <i>Louis Lachance</i>	Follow-up: <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO Date of Follow-up:

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License Expiry Date/EST. ID# 7/30/2021 / 23431	Address 828 LISBON ST	City / State LEWISTON / ME	Zip Code 04240	Telephone 207-577-5995

## Temperature Observations

Location	Temperature	Notes
3 bay sink	50-99 ppm	chlorine sanitizer
Hot holding	140*	sausage patty

Hand wash	103*	
Walk in cooler	37*	creamer
Reach in 1	37*	1/2 and 1/2
Reach in 2	38*	milk

Person in Charge (Signature)



Date: 1/6/2022

Health Inspector (Signature)



LOUIS LACHANCE

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## Observations and Corrective Actions

Violations cited in this report must be corrected within the time frames below, or as stated in sections 8-405.11 and 8-406.11 of the Food Code

6: 2-301.14: C: Food employees are not cleaning their hands and exposed portions of their arms as required.

INSPECTOR NOTES: Food handler did not wash hands before returning/beginning shift. Wash hands immediately when beginning shift, returning to shift or when changing tasks that require hand washing. \*COS

8: 5-205.11.(A): N: Hand wash facility not accessible.

INSPECTOR NOTES: \*\*REPEAT\*\* Hand wash station closest to employee door blocked by large trash receptacle. Keep hand wash facilities easily assessable at all times. \*COS

34: 4-302.12.(A): N: Inadequate number of food temperature measuring devices provided.

INSPECTOR NOTES: Unit 2 Delfield reach in cooler is missing required thermometer. Replace.

47: 4-602.13: N: Non-food contact surfaces are not cleaned at a frequency necessary to preclude accumulation of soil residues.

INSPECTOR NOTES: \*\*REPEAT\*\* Kettle/pitcher storage area for steaming milk products has build up of old food remnants and unclean. Clean and sanitize area as needed and more often as the kettles come in direct contact with food.

Person in Charge (Signature)



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Date 1/6/2022

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Address  
828 LISBON ST

City / State  
LEWISTON

ME

Zip Code  
04240

## Inspection Notes

**\*\*STATE LICENSE HAS EXPIRED. CONTACT STATE HIP TO ARRANGE PAYMENT TO BE CURRENT**

Certified Food Protection Manager: EXEMPT

Every eating establishment must employ on its staff a Certified Food Protection Manager (CFPM). Some establishments are exempt from this requirement. A CFPM certificate must accompany the application for a new establishment and change of ownership. A CFPM must be hired within 60 days of the departure of the last CFPM leaving employment. Eating establishments must post in a conspicuous area the certification of the CFPM(s), and the certificate must be made available to the Department upon request. For a list of CFPM courses and trainers go to <http://www.maine.gov/healthinspection/training.htm>. Please provide a copy of this certification(s) to Casandra Lavallee, Health Inspection Program, 286 Water St. 3rd Floor, Augusta, ME 04333, [casandra.lavallee@maine.gov](mailto:casandra.lavallee@maine.gov) or faxing to 207-287-3165. Please include the name of your establishment and the establishment ID# with your certification(s).

### Employee Health Policy

The Health Inspection Program implemented an educational public health initiative on Employee Health on March 1, 2017. The policy handouts will be provided to you by your inspector and reviewed during inspection for compliance. They are also available on the Program's website: <http://www.maine.gov/healthinspection>

### Violation Correction Timeframe

Critical violations should be corrected on site, but in any event, within 10 days. The licensee must contact your inspector, Laurie Davis when the critical violation has been addressed at 207-592-5573 or [laurie.davis@maine.gov](mailto:laurie.davis@maine.gov). Non-critical violations must be corrected within 30 days. Failure to satisfactorily correct these violations before the follow-up inspection may result in enforcement proceedings by the Department to include fines and penalties. License renewals can be denied if violations are not corrected within the noted timeframes.

C= Critical violation and NC= Non-critical violation

"Critical violation" means a provision of the Food Code that, if in non-compliance, is more likely than other violations to contribute to food contamination, illness or environmental health hazard.

### Additional Inspection Fee

License fees provide for two inspections per year. When additional inspections are required, the Department may charge an additional \$100 fee to cover the costs of each additional inspection or visit.

### Document Retention/Posting

Pursuant to the Maine Food Code, the establishment's current license must be displayed. In addition, a sign or placard must be posted in a conspicuous area notifying consumers that a copy of the most recent inspection report is available upon request. CFPM certificates must be posted in a conspicuous area and must be available to the Department upon request.

Person in Charge (Signature)



Date: 1/6/2022

Health Inspector (Signature)

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