

6077

Connecticut Department of Public Health

EHS-108 Rev. 2/16/23

Risk Category: <u>2</u>		Food Establishment Inspection Report		Page 1 of <u>2</u>	
Establishment type: <u>Permanent</u> Temporary Mobile Other			Date: <u>10/29/24</u>		
Establishment <u>Pranzo Cafe - Research</u>			Time In <u>11:30</u> AM/PM Time Out <u>12:17</u> AM/PM		
Address <u>6 Research Drive 1st</u>			LHD <u>NVHP</u>		
Town/City <u>Shelton</u>			Purpose of Inspection: <u>Routine</u> Pre-op		
Permit Holder <u>Pranzo Cafe, LLC - Mary Blackwell</u>			Reinspection Other		
FOODBORNE ILLNESS RISK FACTORS AND PUBLIC HEALTH INTERVENTIONS					
<small>Risk factors are important practices or procedures identified as the most prevalent contributing factors of foodborne illness or injury. Interventions are control measures to prevent foodborne illness or injury.</small>					
Mark designated compliance status (IN, OUT, N/A, N/O) for each numbered item IN=in compliance OUT=not in compliance N/A=not applicable N/O=not observed					
P=Priority item PF=Priority foundation item C=Core item V=violation type Mark in appropriate box for COS and/or R COS=corrected on-site during inspection R=repeat violation					
IN OUT N/A N/O		Supervision		IN OUT N/A N/O	
1	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Person/Alternate Person in charge present, demonstrates knowledge and performs duties	Pf	<input type="checkbox"/>
2	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Certified Food Protection Manager for Classes 2, 3, & 4	C	<input type="checkbox"/>
IN OUT N/A N/O		Employee Health		IN OUT N/A N/O	
3	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Management, food employee and conditional employee; knowledge, responsibilities and reporting	P/Pf	<input type="checkbox"/>
4	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Proper use of restriction and exclusion	P	<input type="checkbox"/>
5	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Written procedures for responding to vomiting and diarrheal events	Pf	<input type="checkbox"/>
IN OUT N/A N/O		Good Hygienic Practices		IN OUT N/A N/O	
6	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Proper eating, tasting, drinking, or tobacco products use	P/C	<input type="checkbox"/>
7	<input checked="" type="checkbox"/>	<input type="checkbox"/>	No discharge from eyes, nose, and mouth	C	<input type="checkbox"/>
IN OUT N/A N/O		Preventing Contamination by Hands		IN OUT N/A N/O	
8	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Hands clean and properly washed	P/Pf	<input type="checkbox"/>
9	<input checked="" type="checkbox"/>	<input type="checkbox"/>	No bare hand contact with RTE food or a pre-approved alternative procedure properly followed	P/Pf/C	<input type="checkbox"/>
10	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Adequate handwashing sinks, properly supplied/accessible	Pf/C	<input type="checkbox"/>
IN OUT N/A N/O		Approved Source		IN OUT N/A N/O	
11	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Food obtained from approved source	P/Pf/C	<input type="checkbox"/>
12	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Food received at proper temperature	P/Pf	<input type="checkbox"/>
13	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Food in good condition, safe, and unadulterated	P/Pf	<input type="checkbox"/>
14	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Required records available: molluscan shellfish identification, parasite destruction	P/Pf/C	<input type="checkbox"/>
GOOD RETAIL PRACTICES					
<small>Good Retail Practices are preventative measures to control the addition of pathogens, chemicals, and physical objects into foods.</small>					
Mark OUT if numbered item is not in compliance V=violation type Mark in appropriate box for COS and/or R COS=corrected on-site during inspection R=repeat violation					
OUT N/A N/O		Safe Food and Water		OUT N/A N/O	
30	<input type="checkbox"/>	<input type="checkbox"/>	Pasteurized eggs used where required	P	<input type="checkbox"/>
31	<input type="checkbox"/>	<input type="checkbox"/>	Water and ice from approved source	P/Pf/C	<input type="checkbox"/>
32	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Variance obtained for specialized processing methods	Pf	<input type="checkbox"/>
OUT N/A N/O		Food Temperature Control		OUT N/A N/O	
33	<input type="checkbox"/>	<input type="checkbox"/>	Proper cooling methods used; adequate equipment for temperature control	Pf/C	<input type="checkbox"/>
34	<input type="checkbox"/>	<input type="checkbox"/>	Plant food properly cooked for hot holding	Pf	<input type="checkbox"/>
35	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Approved thawing methods used	Pf/C	<input type="checkbox"/>
36	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Thermometers provided and accurate	Pf/C	<input type="checkbox"/>
OUT N/A N/O		Food Identification		OUT N/A N/O	
37	<input type="checkbox"/>	<input type="checkbox"/>	Food properly labeled; original container	Pf/C	<input type="checkbox"/>
OUT N/A N/O		Prevention of Food Contamination		OUT N/A N/O	
38	<input type="checkbox"/>	<input type="checkbox"/>	Insects, rodents, and animals not present	Pf/C	<input type="checkbox"/>
39	<input type="checkbox"/>	<input type="checkbox"/>	Contamination prevented during food preparation, storage & display	P/Pf/C	<input type="checkbox"/>
40	<input type="checkbox"/>	<input type="checkbox"/>	Personal cleanliness	Pf/C	<input type="checkbox"/>
41	<input type="checkbox"/>	<input type="checkbox"/>	Wiping cloths: properly used and stored	C	<input type="checkbox"/>
42	<input type="checkbox"/>	<input type="checkbox"/>	Washing fruits and vegetables	P/Pf/C	<input type="checkbox"/>
Permit Holder shall notify customers that a copy of the most recent inspection report is available.					
Person in Charge (Signature) <u>[Signature]</u>			Date <u>10/29/24</u>		
Person in Charge (Printed)					
Inspector (Signature) <u>Amanda Ruchin</u>			Date <u>10/29/24</u>		
Inspector (Printed) <u>Amanda Ruchin</u>					
Appeal: The owner or operator of a food establishment aggrieved by this order to correct any inspection violation identified by the food inspector or to hold, destroy, or dispose of unsafe food, may appeal such order to the Director of Health, not later than forty-eight hours after issuance of such order.					
Violations documented		Date corrections due		#	
Priority Item Violations		<u>COS</u>		<u>2</u>	
Priority Foundation Item Violations		<u>1/29/25</u>		<u>3</u>	
Core Item Violations				<u>3</u>	
Risk Factor/Public Health Intervention Violations				<u>1</u>	
Repeat Risk Factor/Public Health Intervention Violations				<u>2</u>	
Good Retail Practices Violations				<u>1</u>	
Requires Reinspection - check box if you intend to reinspect				<u>-</u>	

Food Establishment Inspection Report

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LHD NVHD

Inspection Report Continuation Sheet

Date 10/29/24

Establishment Pranzo Cafe

Town Shelton

TEMPERATURE OBSERVATIONS

Item/Location/Process	Temp	Item/Location/Process	Temp	Item/Location/Process	Temp
2 dr reach freezer	0°F	hot holding	165°F	Self Showcase	
3 dr reach unit	38°F	- Green beans	88°F	yogurt cup	38°F
- Sliced Am cheese	36°F	- Stuffed chx	145°F	Fruit cup	38°F
Showcase	35°F	- Shrimp pasta	140°F	Grilled chx Salad	38°F
- Tuna	41°F	- Saus + Bean + Kale Soup	166°F		
- Grilled chx	41°F	- Pappa Alla Pomodoro	140°F		
- hard boiled egg	42°F				

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 & 8-406.11 of the food code.

Item Number	
CFPM-	Mary Blackwell 8/1/28
	Handsink - Stocked ✓, Signage ✓, Hot H ₂ O 115°F
	Sanitizer - Kleen + wipe premade cleaner, NSF wipes, Chlorine
	Datemarking ✓
	Allergen Statement ✓, Allergen poster ✓
	TO go protected/inverted ✓, microwave ✓, Nitrile + vinyl gloves ✓
C 55	mop stored in mop bucket → hang to dry when not in use
P 21 ✓	Green beans not held @ 88°F - cos, reheated to 165°F + placed back in hot holding ✓
C 36	No probe thermometer Available to temp food - have/get one ASAP,
	→ you are hot holding + cold holding + should be able to periodically check internal food temp
P 28 ✓	All purpose "Lemon Scented" Sanitizer used - cos, had PIC discard
	→ only use Chlorine, Quat, Sanitizers w/o Scent that are Food safe (EPA)
	Employee Arrived toward end of inspection, usually in + out, took course but not test yet
C 2	No CFPM Certificate or Staff certified on-site during Inspection
*	→ There should ALWAYS be a CFPM on-site during "peak" hours (lunch)
	if you have a CFPM cert for this estab email copy to ARUCHIN@NVHD.ORG

Person in Charge (Signature) 

Date 10/29/24

Inspector (Signature) Amanda Archin

Date 10/29/24