



DELAWARE HEALTH AND SOCIAL SERVICES
Division of Public Health

Violations cited in this report shall be corrected within the time frames specified below, but within a period not to exceed 3 calendar days for priority items, 10 days for priority foundation items (8-405.11) or 90 days for core items (8-406.11).

9

Food Establishment Inspection Report

Page 1 of 2

Delaware Division of Public Health Office of Food Protection 417 Federal St., Dover, DE 19901		No. of Risk Factor/Intervention Violations <input checked="" type="checkbox"/>	Date <u>5-31-19</u>
		No. of Repeat Risk Factor/Intervention Violations <input checked="" type="checkbox"/>	Time In <u>8:00</u>
		Score (optional) <input checked="" type="checkbox"/>	Time Out <u>9:00</u>
Establishment <u>Best Lobster Plus</u>	Address <u>875 Pulaski Hwy</u>	City/State <u>Bear, DE</u>	Zip Code <u>19701</u>
License/Permit # <u>Unpermitted</u>	Permit Holder <u>None</u>	Purpose of Inspection <u>Pool Inspection</u>	Est. Type <u>FE</u>
			Telephone <u>306-2500</u>
			Risk Category <u>—</u>

FOODBORNE ILLNESS RISK FACTORS AND PUBLIC HEALTH INTERVENTIONS

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

Compliance Status			COS	R
Supervision				
1	IN OUT	Person in charge present, demonstrates knowledge, and performs duties		
2	IN OUT N/A	Certified Food Protection Manager		
Employee Health				
3	IN OUT	Management, food employee and conditional employee; knowledge, responsibilities and reporting		
4	IN OUT	Proper use of restriction and exclusion		
5	IN OUT	Procedures for responding to vomiting and diarrheal events		
Good Hygienic Practices				
6	IN OUT N/O	Proper eating, tasting, drinking, or tobacco use		
7	IN OUT N/O	No discharge from eyes, nose, and mouth		
Preventing Contamination by Hands				
8	IN OUT N/O	Hands clean & properly washed		
9	IN OUT N/A N/O	No bare hand contact with RTE food or a pre-approved alternative procedure properly allowed		
10	IN OUT	Adequate handwashing sinks properly supplied and accessible		
Approved Source				
11	IN OUT	Food obtained from approved source		
12	IN OUT N/A N/O	Food received at proper temperature		
13	IN OUT	Food in good condition, safe, & unadulterated		
14	IN OUT N/A N/O	Required records available: shellstock tags, parasite destruction		
Protection from Contamination				
15	IN OUT N/A N/O	Food separated and protected		
16	IN OUT N/A	Food-contact surfaces: cleaned & sanitized		

Compliance Status			COS	R
17	IN OUT	Proper disposition of returned, previously served, reconditioned & unsafe food		
Time/Temperature Control for Safety				
18	IN OUT N/A N/O	Proper cooking time & temperatures		
19	IN OUT N/A N/O	Proper reheating procedures for hot holding		
20	IN OUT N/A N/O	Proper cooling time and temperature		
21	IN OUT N/A N/O	Proper hot holding temperatures		
22	IN OUT N/A N/O	Proper cold holding temperatures		
23	IN OUT N/A N/O	Proper date marking and disposition		
24	IN OUT N/A N/O	Time as a Public Health Control; procedures & records		
Consumer Advisory				
25	IN OUT N/A	Consumer advisory provided for raw/undercooked food		
Highly Susceptible Populations				
26	IN OUT N/A	Pasteurized foods used; prohibited foods not offered		
Food/Color Additives and Toxic Substances				
27	IN OUT N/A	Food additives: approved & properly used		
28	IN OUT N/A	Toxic substances properly identified, stored, & used		
Conformance with Approved Procedures				
29	IN OUT N/A	Compliance with variance/specialized process/HACCP		

Risk factors are important 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.

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
Safe Food and Water				
30		Pasteurized eggs used where required		
31		Water & ice from approved source		
32		Variance obtained for specialized processing methods		
Food Temperature Control				
33		Proper cooling methods used; adequate equipment for temperature control		
34		Plant food properly cooked for hot holding		
35		Approved thawing methods used		
36		Thermometers provided & accurate		
Food Identification				
37		Food properly labeled; original container		
Prevention of Food Contamination				
38		Insects, rodents, & animals not present		
39		Contamination prevented during food preparation, storage & display		
40		Personal cleanliness		
41		Wiping cloths: properly used & stored		
42		Washing fruits & vegetables		

Compliance Status			COS	R
Proper Use of Utensils				
43		In-use utensils: properly stored		
44		Utensils, equipment & linens: properly stored, dried, & handled		
45		Single-use/single-service articles: properly stored & used		
46		Gloves used properly		
Utensils, Equipment and Vending				
47		Food & non-food contact surfaces cleanable, properly designed, constructed, & used		
48		Warewashing facilities: installed, maintained, & used; test strips		
49		Non-food contact surfaces clean		
Physical Facilities				
50		Hot & cold water available; adequate pressure		
51		Plumbing installed; proper backflow devices		
52		Sewage & waste water properly disposed		
53		Toilet facilities: properly constructed, supplied, & cleaned		
54		Garbage & refuse properly disposed; facilities maintained		
55		Physical facilities installed, maintained, & clean		
56		Adequate ventilation & lighting; designated areas used		

Person in Charge (Signature) [Signature] Date: 5-31-19

Inspector (Signature) NCC/EHSII/#042 Follow-up: YES NO (Circle one) Follow-up Date: _____



Inspection Report

Delaware Division of Public Health
Health Systems Protection
417 Federal St., Dover, DE 19901

License/Permit # None

Date 5-31-19

Establishment Best Western Plus Address 875 Pulaski Hwy City/State Bear, DE Zip Code 19701 Telephone 336-2500

OBSERVATIONS AND CORRECTIVE ACTIONS

Item Number

On Friday, 5-31-19, the Division of Public Health arrived at the Best Western Plus located at 875 Pulaski Hwy, Bear, DE 19701. The purpose of the visit was to conduct a follow up inspection of their spa. While on property the Health Department observed a buffet in the lobby consisting of cereal, milk, yogurt, coffee, juice, bacon, eggs, waffles, bagels, and pastries.

On 1-9-19, the Health Department responded to a complaint at the same establishment regarding the swimming pool and a possible unpermitted food establishment consisting of a buffet in the lobby. Upon inspection, the Health Department did observe a buffet in the lobby. Management was contacted and informed to cease operation immediately. A Cease and desist letter was sent and instructed the establishment that if operation continued, there could be a fine of up to \$1000. Management was instructed that they could offer pre packaged items where no food preparation occurred without obtaining a food permit. A food application permit was given and is still listed as incomplete.

Please cease operation of the buffet immediately. A \$1000 fee ^{max} ~~will~~ ^{SH} be issued today, and a second cease and desist letter will be issued. Failure to cease operation of the buffet may result in additional fees.

Person in Charge (Signature)

Sam

Date:

5-31-19

Inspector (Signature)

NCC/EHSII/#042

Date:

5-31-19