



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).

Food Establishment Inspection Report

Page 1 of 4

Delaware Division of Public Health		No. of Risk Factor/Intervention Violations <u>3</u>		Date <u>11-6-19</u>
Office of Food Protection		No. of Repeat Risk Factor/Intervention Violations <u>0</u>		Time In <u>11:25</u>
417 Federal St., Dover, DE 19901		Score (optional) <u>N/A</u>		Time Out <u>1:30pm</u>
Establishment <u>Ciao Pizza</u>	Address <u>3218 Kirkwood Hwy Wilm, DE</u>	City/State <u>Wilmington, DE</u>	Zip Code <u>19810</u>	Telephone <u>302994-4541</u>
License/Permit # <u>N992263/1-1-20</u>	Permit Holder <u>Kenza Enterprises</u>	Purpose of Inspection <u>Complaint</u>	Est. Type <u>CE</u>	Risk Category <u>Med</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		Compliance Status	
IN	OUT	IN	OUT
Supervision			
1	IN	17	IN
Person in charge present, demonstrates knowledge, and performs duties		Proper disposition of returned, previously served, reconditioned & unsafe food	
2	IN	Time/Temperature Control for Safety	
Certified Food Protection Manager		18	IN
		Proper cooking time & temperatures	
Employee Health			
3	IN	19	IN
Management, food employee and conditional employee; knowledge, responsibilities and reporting		Proper reheating procedures for hot holding	
4	IN	20	IN
Proper use of restriction and exclusion		Proper cooling time and temperature	
5	IN	21	IN
Procedures for responding to vomiting and diarrheal events		Proper hot holding temperatures	
Good Hygienic Practices			
6	IN	22	IN
Proper eating, tasting, drinking, or tobacco use		Proper cold holding temperatures	
7	IN	23	IN
No discharge from eyes, nose, and mouth		Proper date marking and disposition	
Preventing Contamination by Hands			
8	IN	24	IN
Hands clean & properly washed		Time as a Public Health Control; procedures & records	
9	IN	Consumer Advisory	
No bare hand contact with RTE food or a pre-approved alternative procedure properly allowed		25	IN
10	IN	Consumer advisory provided for raw/undercooked food	
Adequate handwashing sinks properly supplied and accessible		Highly Susceptible Populations	
Approved Source			
11	IN	26	IN
Food obtained from approved source		Pasteurized foods used; prohibited foods not offered	
12	IN	Food/Color Additives and Toxic Substances	
Food received at proper temperature		27	IN
13	IN	Food additives: approved & properly used	
Food in good condition, safe, & unadulterated		28	IN
14	IN	Toxic substances properly identified, stored, & used	
Required records available: shellstock tags, parasite destruction		Conformance with Approved Procedures	
Protection from Contamination			
15	IN	29	IN
Food separated and protected		Compliance with variance/specialized process/HACCP	
16	IN		
Food-contact surfaces: cleaned & sanitized			

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.

Safe Food and Water		Proper Use of Utensils	
IN	OUT	IN	OUT
30	IN	43	IN
Pasteurized eggs used where required		In-use utensils: properly stored	
31	IN	44	IN
Water & ice from approved source		Utensils, equipment & linens: properly stored, dried, & handled	
32	IN	45	IN
Variance obtained for specialized processing methods		Single-use/single-service articles: properly stored & used	
Food Temperature Control			
33	IN	46	IN
Proper cooling methods used; adequate equipment for temperature control		Gloves used properly	
34	IN	Utensils, Equipment and Vending	
Plant food properly cooked for hot holding		47	IN
35	IN	Food & non-food contact surfaces cleanable, properly designed, constructed, & used	
Approved thawing methods used		48	IN
36	IN	Warewashing facilities: installed, maintained, & used; test strips	
Thermometers provided & accurate		49	IN
		Non-food contact surfaces clean	
Food Identification			
37	IN	Physical Facilities	
Food properly labeled; original container		50	IN
		Hot & cold water available; adequate pressure	
Prevention of Food Contamination			
38	IN	51	IN
Insects, rodents, & animals not present		Plumbing installed; proper backflow devices	
39	IN	52	IN
Contamination prevented during food preparation, storage & display		Sewage & waste water properly disposed	
40	IN	53	IN
Personal cleanliness		Toilet facilities: properly constructed, supplied, & cleaned	
41	IN	54	IN
Wiping cloths: properly used & stored		Garbage & refuse properly disposed; facilities maintained	
42	IN	55	IN
Washing fruits & vegetables		Physical facilities installed, maintained, & clean	
		56	IN
		Adequate ventilation & lighting; designated areas used	

Person in Charge (Signature) [Signature] Date: 11-6-19

Inspector (Signature) NCC/ESH/ST/043 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 # N982263

Date 11-6-19

Establishment Giao's

Address 3218 Kirkwood Hwy Wilm DE

City/State Wilm DE

Zip Code 19808

Telephone

OBSERVATIONS AND CORRECTIVE ACTIONS

Item Number

Complaint

Reporting person stated that they observed roaches running around in Q/A Food Establishment and is very dirty.

Observation

Upon inspection, spoke with operator regarding complaint. Operator is aware of roach issue and currently has monthly pest service with Ehrlich. Inspector thoroughly inspected entire establishment. During inspection, inspector observed both live and dead roaches. Inspector observed live roaches behind cookline, live roach observed on fryer. Live and dead roaches observed under grill. Two live roaches observed on floor in prep area. Inspector also observed live roach crawling on wall in dining area. General sanitation of establishment is satisfactory. Operator explained after last pest service treatment on 10-13-19, he closed early and cleaned out establishment. Operator indicates he has been cleaning nightly. Last pest report indicates roaches are in walls and equipment.

Violations

8-404.11 (P) Closing due to Imminent Health Hazard of roach infestation and gross unsanitary conditions.

38-6-501.111 (PE) Inspector observed several live and dead roaches throughout establishment including cookline, on floors in prep area,

Person in Charge (Signature)

[Signature]

Date:

Inspector (Signature)

[Signature] N982263

Date:



Inspection Report

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

License/Permit #
N982263

Date 11-6-19

Establishment
Ciao Pizza

Address
3218 Kirkwood Hwy Wilm, DE

City/State

Zip Code
19808

Telephone
302.994.4541

OBSERVATIONS AND CORRECTIVE ACTIONS

Item Number

and in dining area.

16 4.601.11 (PF) Food contact surfaces not clean. observed live roach on fryer and dead roach in grill trap area.

CLOSED

Establishment closed due to Imminent health hazard of roach infestation and gross unsanitary conditions. Operator must cease and desist all operation effective immediately. Operator must remain closed until approval to reopen by Health Dept.

The following discrepancies must be resolved before approval to reopen:

- Please clean and sanitize entire establishment.
- All shelves must be cleaned and free of any items - remove pizza boxes, To-Go containers, bags, and condiments.
- Remove all food from cookline and prep line and clean and sanitize equipment.
- Request immediate Pest service visit with detailed pest report.
- All equipment on cookline and prep line must be treated.
- Increase Pest service frequency to weekly until pest are eliminated.
- Inspector must not observe live or dead

Person in Charge (Signature)

[Signature]

Date: 11-6-19

Inspector (Signature)

NCC/EH5#1043

Date: 11-6-19



DELAWARE HEALTH AND SOCIAL SERVICES
 Division of Public Health

Inspection Report

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

License/Permit #
N982263

Date 11-6-19

Establishment
Ciaos

Address
3218 Kirkwood Hwy Wilm, DE

City/State

Zip Code
19808

Telephone
302 994-4541

OBSERVATIONS AND CORRECTIVE ACTIONS

Item
 Number

roaches during reopening inspection.

Person in Charge (Signature)

[Handwritten Signature]

Date: 11-6-19

Inspector (Signature)

NCEH811/043

Date: 11-6-19