

## Food Facility Inspection Report

**Bucks County Department of Health**  
**Health Building, Neshaminy Manor Center**  
**Doylestown, PA 18901 (215) 345-3318**

Total Violations	0	Date of Inspection	06/23/2021
Risk Violations Count	0	Inspection Time	00.6
Arrival Time	13:35	Recommended for License	YES
Travel Time	00.0	Facility Closure	NO

<b>Food Facility</b>	<b>Address</b>	<b>City/State</b>	<b>Zip Code</b>	<b>Telephone</b>
LOWER MAKEFIELD POOL SNACK BAR	1050 EDGEWOOD RD	YARDLEY, PA	19067	(215) 868-8208

<b>Facility ID #</b>	<b>Owner</b>	<b>Purpose of Inspection</b>	<b>License Type</b>	<b>Risk Category</b>
204400	LOWER MAKEFIELD TOWNSHIP	Initial	Seasonal	2

**FOODBORNE ILLNESS RISK FACTORS AND PUBLIC HEALTH INTERVENTIONS**

IN=in compliance    OUT=not in compliance    N/O=not observed    N/A=not applicable    COS=corrected on-site during inspection    R=repeat violation

<b>Compliance Status</b>	COS	R	<b>Compliance Status</b>	COS	R
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**Demonstration of Knowledge**

1    IN    Certification by accredited program, compliance with Code, or correct responses

**Employee Health**

2    IN    Management awareness; policy present  
 3    IN    Proper use of reporting; restriction & exclusion

**Good Hygienic Practices**

4    IN    Proper eating, tasting, drinking, or tobacco use  
 5    IN    No discharge from eyes, nose, and mouth

**Preventing Contamination by Hazards**

6    IN    Hands clean & properly washed  
 7    IN    No bare hand contact with RTE foods or approved alternate method properly followed

8    IN    Adequate handwashing facilities supplied & accessible

**Approved Source**

9    IN    Food obtained from approved source  
 10    N/O    Food received at proper temperature  
 11    IN    Food in good condition, safe, & unadulterated

12    N/A    Required records available: shellstock tags, parasite destruction

**Protection from Contamination**

13    IN    Food separated & protected  
 14    IN    Food-contact surfaces: cleaned & sanitized  
 15    IN    Proper disposition of returned, previously served, reconditioned, & unsafe food

**Potentially Hazardous Food Time/Temperature**

16    IN    Proper cooking time & temperature  
 17    IN    Proper reheating procedures for hot holding  
 18    IN    Proper cooling time & temperature  
 19    IN    Proper hot holding temperature  
 20    IN    Proper cold holding temperature  
 21    IN    Proper date marking & disposition  
 22    IN    Time as a public health control; procedures & record

**Consumer Advisory**

23    N/A    Consumer advisory provided for raw or undercooked foods

**Highly Susceptible Populations**

24    N/A    Pasteurized foods used; prohibited foods not offered

**Chemical**

25    N/A    Food additives: approved & properly used  
 26    IN    Toxic substances properly identified, stored & used

**Conformance with Approved Procedure**

27    N/A    Compliance with variance, specialized process, & HACCP plan

Risk factors 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. \* - Critical Item Requiring Immediate Action

**GOOD RETAIL PRACTICES**

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

<b>Compliance Status</b>	COS	R	<b>Compliance Status</b>	COS	R
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**Safe Food and Water**

28    IN    Pasteurized eggs used where required  
 29    IN    Water & ice from approved source  
 30    IN    Variance obtained for specialized processing methods

**Food Temperature Control**

31    IN    Proper cooling methods used; adequate equipment for temperature control  
 32    IN    Plant food properly cooked for hot holding  
 33    IN    Approved thawing methods used  
 34    IN    Thermometer provided & accurate  
 35    IN    Food properly labeled; original container

**Prevention of Food Contamination**

36    IN    Insects, rodents & animals not present; no unauthorized persons  
 37    IN    Contamination prevented during food preparation, storage & display  
 38    IN    Personal cleanliness  
 39    IN    Wiping cloths: properly used & stored  
 40    IN    Washing fruit & vegetables

**Proper Use of Utensils**

41    IN    In-use utensils: properly stored  
 42    IN    Utensils, equipment & linens: properly stored, dried & handled  
 43    IN    Single-use & single-service articles: properly stored & used  
 44    IN    Gloves used properly

**Utensils, Equipment and Vending**

45    IN    Food & non-food contact surfaces cleanable, properly designed, constructed, & used  
 46    IN    Warewashing facilities: installed, maintained, & used; test strips  
 47    IN    Non-food contact surfaces clean

**Physical Facilities**

48    IN    Hot & cold water available; adequate pressure  
 49    IN    Plumbing installed; proper backflow devices  
 50    IN    Sewage & waste water properly disposed  
 51    IN    Toilet facilities: properly constructed, supplied, & cleaned  
 52    IN    Garbage & refuse properly disposed; facilities maintained  
 53    IN    Physical facilities installed, maintained, & clean  
 54    IN    Adequate ventilation & lighting; designated areas used

DHD [initials]

N/A

**Person in Charge (Signature)**

**Title** Stephen Sicilia, CFSM

**Date:** 06/23/2021

*[Handwritten Signature]*

**Inspector (Signature)** Stephen Bobbs (144)

**Date:** 06/23/2021

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<b>Facility ID #</b> 204400	<b>Owner</b> LOWER MAKEFIELD TOWNSHIP	<b>Purpose of Inspection</b> Initial	<b>License Type</b> Seasonal	<b>Risk Category</b> 2

**TEMPERATURE OBSERVATIONS**

Item/Location	Temp	Item/Location	Temp	Item/Location	Temp
Tuna/Prep unit - top	40 ° F	Sliced tomatoes /Prep unit - bottom	44 ° F	Raw beef hamburger /BeverageAir 2-door refrigerator	43 ° F
Ambient/True 2-door freezer	8 ° F	Chicken tenders/Hot-Hold Unit	138 ° F	Ambient/Avantco 2-door lowboy freezer	1 ° F
Ambient/GE chest freezer	12 ° F	Cheese sauce/Hot-Hold Unit	144 ° F	Ambient/Migali 3-door lowboy refrigerator	40 ° F
Ambient/Walk-In Cooler	36 ° F	Turkey/Walk-In Cooler	33 ° F	Ambient/Walk-in freezer	7 ° F

**OBSERVATIONS AND CORRECTIVE ACTIONS**

Violations cited in this report must be corrected within the time frames below.

Item Number

**General Remarks**

*Signature*

N/A

**Person in Charge (Signature)**

**Title** Stephen Sicilia, CFSM

**Date:** 06/23/2021

*Signature*

**Inspector (Signature)** Stephen Bobbs (144)

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