



# Retail Food Establishment Inspection Report part I

As Governed by Title 50, Chapter 50 Montana Code Annotated (MCA) and the Administrative Rules of Montana (ARM):Title 37, Chapter 110, Subchapter 2 Failure to comply with any time limits for corrections of critical item violations may result in cessation of food service operations." [ARM 37.110.239 (5)]

|  |  |   |
|--|--|---|
| <b>Establishment</b> MCQUEEN ATHLETIC CLUB   | <b>No. of Risk Factor/Intervention Violations</b> 0        | <b>Date</b> 10-05-2021  |
| <b>Address</b> 3250 HECLA  | <b>No. of Repeat Risk Factor/Intervention Violations</b> 0 | <b>Time In</b> 02:37:23   |
| <b>City</b> BUTTE <b>County:</b> Silver Bow  | <b>Water:</b> PWS# MT000017                                | <b>Time Out</b> 02:42:08  |
| <b>Licensee:</b> MCQUEEN ATHLETIC CLUB   | <b>Wastewater:</b> MPDDS#                                  | <b>Risk Category</b>  |
| <b>License #</b> F 2487  | <b>License Types (s):</b> Tavern or Bar                    | Current water test 1 <input checked="" type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> |
| <b>Purpose of Inspection:</b> Regular <input checked="" type="checkbox"/> Follow-up <input type="checkbox"/> Pre-opening <input type="checkbox"/> Complaint <input type="checkbox"/> Illness <input type="checkbox"/> HACCP <input type="checkbox"/> Investigation <input type="checkbox"/> Other <input type="checkbox"/> |  |   |

## FOODBORNE ILLNESS RISK FACTORS AND PUBLIC HEALTH INTERVENTIONS

| Compliance Status                        |     | COS  |  | R |  |
|--|-----|--|--|---|--|
| <b>SUPERVISION</b>                       |     |  |  |   |  |
| 1  | IN  | Person in charge present, demonstrates knowledge, and performs duties                          |  |   |  |
| 2  | IN  | Certified Food Protection Manager  |  |   |  |
| <b>Employee Health</b>                   |     |  |  |   |  |
| 3  | IN  | Management, food employee and conditional employee, knowledge, responsibilities and reporting. |  |   |  |
| 4  | IN  | Proper use of restriction and exclusion  |  |   |  |
| 5  | IN  | Procedures for responding to vomiting and diarrheal events                                     |  |   |  |
| <b>Good Hygienic Practices</b>           |     |  |  |   |  |
| 6  | IN  | Proper eating, tasting, drinking, or tobacco use   |  |   |  |
| 7  | IN  | No discharge from eyes, nose, and mouth  |  |   |  |
| <b>Preventing Contamination by Hands</b> |     |  |  |   |  |
| 8  | IN  | Hands clean & properly washed  |  |   |  |
| 9  | N/A | No bare hand contact with RTE food or a pre-approved alternative procedure properly allowed    |  |   |  |
| 10                                       | IN  | Adequate handwashing sinks properly set up & accessible  |  |   |  |
| <b>Approved Source</b>                   |     |  |  |   |  |
| 11                                       | IN  | Food obtained from approved source   |  |   |  |
| 12                                       | IN  | Food received at proper temperature  |  |   |  |
| 13                                       | IN  | Food in good condition, safe, & unadulterated  |  |   |  |
| 14                                       | N/A | Required records available: shellstock tags, parasite destruction                              |  |   |  |
| <b>Protection from Contamination Arm</b> |     |  |  |   |  |
| 15                                       | IN  | Food separated & protected   |  |   |  |
| 16                                       | IN  | Food-contact surfaces: cleaned & sanitized   |  |   |  |
| 17                                       | IN  | Proper disposition of returned, previously served, reconditioned, & unsafe food                |  |   |  |

  

| Compliance Status                                  |     | COS   |  | R |  |
|--|-----|---|--|---|--|
| <b>Potentially Hazardous Food Time/Temperature</b> |     |   |  |   |  |
| 18   | N/A | Proper cooking time & temperatures                      |  |   |  |
| 19   | N/O | Proper reheating procedures for hot holding             |  |   |  |
| 20   | N/A | Proper cooling time & temperatures                      |  |   |  |
| 21   | N/A | Proper hot holding temperatures                         |  |   |  |
| 22   | IN  | Proper cold holding temperatures                        |  |   |  |
| 23   | IN  | Proper date marking & disposition                       |  |   |  |
| 24   | N/A | Time as a public health control: procedures & records   |  |   |  |
| <b>Consumer Advisory</b>                           |     |   |  |   |  |
| 25   | N/A | Consumer advisory provided for raw or undercooked foods |  |   |  |
| <b>Highly Susceptible Populations</b>              |     |   |  |   |  |
| 26   | N/A | Pasteurized foods used; prohibited foods not offered    |  |   |  |
| <b>Food/Color Additives and Toxic Substances</b>   |     |   |  |   |  |
| 27   | N/A | Food additives: approved & properly used                |  |   |  |
| 28   | IN  | Toxic substances properly identified, stored, & used    |  |   |  |
| <b>Conformance with Approved Procedures</b>        |     |   |  |   |  |
| 29   | N/A | Compliance with variance/specialized process/HACCP      |  |   |  |

**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.

## GOOD RETAIL PRACTICES

| Compliance Status                       |  | COS   |  | R |  |
|---|--|---|--|---|--|
| <b>Safe Food and Water</b>              |  |   |  |   |  |
| 30                                      |  | Pasteurized eggs used where required                                    |  |   |  |
| 31                                      |  | Water & ice from approved source  |  |   |  |
| 32                                      |  | Variance obtained for specialized processing methods                    |  |   |  |
| <b>Food Temperature Control</b>         |  |   |  |   |  |
| 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  |  |   |  |
| <b>Food Identification</b>              |  |   |  |   |  |
| 37                                      |  | Food properly labeled; original container                               |  |   |  |
| <b>Prevention of Food Contamination</b> |  |   |  |   |  |
| 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 |  |
|--|--|--|--|---|--|
| <b>Proper Use of Utensils</b>          |  |  |  |   |  |
| 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   |  |   |  |
| <b>Utensils, Equipment and Vending</b> |  |  |  |   |  |
| 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  |  |   |  |
| <b>Physical Facilities</b>             |  |  |  |   |  |
| 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                             |  |   |  |

|  |                        |
|--|------------------------|
| <b>Person in Charge (Signature)</b> <i>Jerry Hogan</i> | <b>Date:</b> 10-5-21   |
| <b>Inspector (Signature)</b> <i>Jenna Fisher, RS</i>   | <b>Follow-up:</b> NO   |
|  | <b>Follow-up Date:</b> |

# Retail Food Establishment Inspection Form part II

|  |   |                         |
|--|---|-------------------------|
| <b>Establishment</b> MCQUEEN ATHLETIC CLUB | <b>SANITIZER LEVEL</b>                  | <b>License #</b> F 2487 |
|  | CHEMICAL LOW TEMPERATURE DISH MACHINE   | 0.0                     |
| Current License Posted ARM 37.110.238      | YES                                     | WIPING CLOTH BUCKET 0.0 |
| Certified Food Safety Manager              | YES                                     | SPRAY BOTTLES 0.0       |
| SANITIZER: CHLORINE,                       | MANUAL DISHWASHING (3 COMPARTMENT SINK) | 50.0                    |

| TEMPERATURE OBSERVATIONS |      |               |      |               |      |
|--------------------------|------|---------------|------|---------------|------|
| Item/Location            | Temp | Item/Location | Temp | Item/Location | Temp |
| clamato, back reach-in   | 39.0 |               |      |               |      |
|                          |      |               |      |               |      |
|                          |      |               |      |               |      |
|                          |      |               |      |               |      |
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|                          |      |               |      |               |      |
|                          |      |               |      |               |      |

### OBSERVATIONS AND CORRECTIVE ACTIONS

| ARM Code Reference | Violations cited in this report must be corrected withing the time frame listed, or as stated in ARM 37.110.239. | Correction Date |
|--------------------|--|-----------------|
|                    | No violations at time of inspection.   |                 |
|                    |  |                 |
|                    | hoganjp@hotmail.com  |                 |
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|--|---------------------|
| <b>Person in Charge (Signature)</b> <i>Jerry Hogan</i> | <b>Date</b> 10-5-21 |
| <b>Inspector (Signature)</b> <i>Jenna Fisher, RS</i>   | <b>Date</b> 10-5-21 |