

FOOD ESTABLISHMENT INSPECTION REPORT R-10

Brazilian American Center (BRACE)
562 Waverly St.
Framingham, MA 01702

<u>Inspection Number</u>	A29D0	<u>Date</u>	5/30/24	<u>Time In/Out</u>	11:10 AM 2:01 PM	<u>Inspection Type</u>	Routine	<u>Client Type</u>	Restaurant	<u>Inspector</u>	M.LeFort	
<u>Permit Number</u>	BOH150701	<u>Risk</u>	2	<u>Variance</u>		<u>Violation Summary:</u>			<u>Priority</u>	<u>Pf</u>	<u>Core</u>	<u>Repeat</u>
									2	1	6	

Foodborne Illness Risk Factors and Public Health Interventions

IN = in compliance OUT= out of compliance N/O = not observed N/A = not applicable COS = corrected on-site during inspection Repeat Violations Highlighted in Yellow

Supervision	IN	OUT	NA	NO	COS	Protection from Contamination (Cont'd)	IN	OUT	NA	NO	COS
1. PIC present, demonstrates knowledge, and performs duties	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	15. Food separated and protected	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
2. Certified Food Protection Manager	1	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	16. Food-contact surfaces; cleaned & sanitized	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Employee Health	IN	OUT	NA	NO	COS	17. Proper disposition of returned, previously served, reconditioned & unsafe foods	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. Management, food employee and conditional employee knowledge, responsibilities and reporting	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Time/Temperature Control for Safety					
4. Proper use of restriction and exclusion	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	18. Proper cooking time & temperatures	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
5. Procedures for responding to vomiting and diarrheal events	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	19. Proper reheating procedures for hot holding	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Good Hygienic Practices	IN	OUT	NA	NO	COS	20. Proper cooling time and temperature	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
6. Proper eating, tasting, drinking, or tobacco use	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	21. Proper hot holding temperatures	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
7. No discharge from eyes, nose, and mouth	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	22. Proper cold holding temperatures	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
						23. Proper date marking and disposition	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Preventing Contamination by Hands	IN	OUT	NA	NO	COS	24. Time as a Public Health Control; procedures & records	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8. Hands clean & properly washed	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Consumer Advisory					
9. No bare hand contact with RTE food or a pre-approved alternative procedure properly allowed	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	25. Consumer advisory provided for raw/undercooked food	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10. Adequate handwashing sinks supplied and accessible	1	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Highly Susceptible Populations					
						26. Pasteurized foods used; prohibited foods not offered	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Approved Source	IN	OUT	NA	NO	COS	Food/Color Additives and Toxic Substances					
11. Food obtained from approved source	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	27. Food additives: approved & properly used	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
12. Food received at proper temperature	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	28. Toxic substances properly identified, stored & used	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
13. Food in good condition, safe & unadulterated	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Conformance with Approved Procedures					
14. Required records available: shellstock tags, parasite destruction,	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	29. Compliance with variance/specialized process/HACCP	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Repeat Violations Highlighted in Yellow

Good Retail Practices

Safe Food and Water	IN	OUT	NA	NO	COS	Proper Use of Utensils	IN	OUT	NA	NO	COS
30. Pasteurized eggs used where required	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	43. In-use utensils: properly stored	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
31. Water & ice from approved source	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	44. Utensils, equip. & linens: property stored, dried & handled	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
32. Variance obtained for specialized processing methods	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	45. Single-use/single-service articles: properly stored & used	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Food Temperature Control	IN	OUT	NA	NO	COS	46. Gloves used properly	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
33. Proper cooling methods used; adequate equip. for temp. control	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Utensils, Equipment and Vending					
34. Plant food properly cooked for hot holding	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	47. All contact surfaces cleanable, properly designed, constructed, & used	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
35. Approved thawing methods used	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	48. Warewashing facilities: installed, maintained & used; test strips	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
36. Thermometers provided & accurate	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	49. Non-food contact surfaces clean	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Food Identification	IN	OUT	NA	NO	COS	Physical Facilities					
37. Food properly labeled; original container	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	50. Hot & cold water available; adequate pressure	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
						51. Plumbing installed; proper backflow devices	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Prevention of Food Contamination	IN	OUT	NA	NO	COS	52. Sewage & waste water properly disposed	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
38. Insects, rodents & animals not present	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	53. Toilet facilities: properly constructed, supplied, & cleaned	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
39. Contamination prevented in prep, storage & display	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	54. Garbage & refuse properly disposed; facilities maintained	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
40. Personal cleanliness	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	55. Physical facilities installed, maintained & clean	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
41. Wiping cloths; properly used & stored	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	56. Adequate ventilation & lighting; designated areas use	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
42. Washing fruits & vegetables	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	60. 105 CMR 590 violations / local regulations	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Official Order for Correction: Based on an inspection today, the items marked "OUT" indicated violations of 105 CMR 590.000 and applicable sections of the 2013 FDA Food Code. This report, when signed below by a Board of Health member or its agent constitutes an order of the Board of Health. Failure to correct violations cited in this report may result in suspension or revocation of the food establishment permit and cessation of food establishment operations. If you are subject to a notice of suspension, revocation, or non-renewal pursuant to 105 CMR 590.000 you may request a hearing before the board of health in accordance with 105 CMR 590.015(B).

M. LeFort

M. LeFort

Unable to obtain signature

Liliane Costa - Expires 5/2/2027
Certificate #: 22123977

Follow Up Required: Y Follow Up Date: _____

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Page Number

2

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Inspection Report (Continued)

Repeat Violations Highlighted in Yellow

Supervision

Certified Food Protection Manager

- 2 **2-102.12 (A) Certified Food Protection Manager - Kitchen -**
- C** Observed Certified Food Protection Manager Certificate not posted. *Code: At least one employee that has supervisory and management responsibility and the authority to direct and control food preparation and service shall be a certified food protection manager who has shown proficiency of required information through passing a test that is part of an accredited program.*

Employee Health

Management, food employee and conditional employee; knowledge,

- 60 **FRAM: FC 2-201.11 105 CMR 590.002 (E) - Kitchen -**
- Pr** Observed no Written Employee Health Policy on site. *Code: All food establishments shall maintain a written employee health policy that is maintained and accessible at the food establishments at all times.*
-
- 60 **FRAM: FC 2-501.11 Clean-up Vomiting & Diarrheal Events - Kitchen -**
- Pf** Observed no written procedures for vomit and diarrhea on site. *Code: A food establishment shall have written procedures for employees to follow when responding to vomiting or diarrhea events that involve the discharge of vomitus or fecal matter onto surfaces in the food establishment. The procedures shall address the specific actions employees must take to minimize the spread of contamination and the exposure of employees, consumers, food, and surfaces to vomitus or fecal matter.*

Preventing Contamination by Hands

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3

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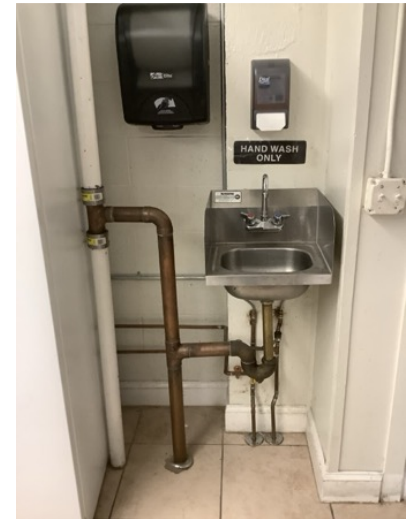
Inspection Report (Continued)

Repeat Violations Highlighted in Yellow

Adequate handwashing sinks properly supplied and accessible

10 6-301.20 Disposable Towels, Waste Receptacle - Kitchen -

- C** Observed no waste receptacle for hand washing sink located next to door that leads to outside parking lot. PIC put a waste receptacle for this hand washing sink. *Code: A handwashing sink or group of adjacent handwashing sinks that is provided with disposable towels shall be provided with a waste receptacle.*



Time / Temperature Control for Safety

Cold Holding Temperature

22 3-501.16 (A)(2) (B) Proper Cold Holding Temps. - Kitchen -

- Pr** Observed ambient temperature for Maytag Refrigerator at 43.3°F. Ensure ambient temperature for Maytag refrigerator is at 41°F or below at all times. *Code: Except during preparation, cooking, or cooling, or when time is used as the public health control as specified under section 3-501.19, and except as specified under paragraph (B) and in paragraph (C) of this section, TCS food shall be maintained at 41°F or less. Eggs that have not been treated to destroy all viable Salmonellae shall be stored in refrigerated equipment that maintains an ambient air temperature of 45°F or less.*

Additional Requirement

Violations Related to Good Retail Practices

60 MA 590.011 (C)(1) Food Allergy Awareness Requirements - Poster - Kitchen -

- C** Observed no food allergy posted in food prep area. *Code: Food establishments that cook, prepare, or serve food intended for immediate consumption either on or off the premises shall prominently display in the employee work area a poster approved by the Department, no smaller than 8.5 by 11 inches, relating to major food allergens. The poster shall include the following information: (a) Major food allergens; (b) Health risks of food allergies; (c) Procedure to follow when a customer states that he or she has a food allergy; and (d) Emergency procedure to follow if a customer has an allergic reaction to a food.*

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4

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- 60 MA 590.011 (C)(3) Food Allergy Awareness Requirements - Training - Kitchen -**
- C** Observed Food Allergy Awareness Certificate not posted. *Code: Food establishments that cook, prepare, or serve food intended for immediate consumption either on or off the premises shall have on staff a certified food protection manager who has been issued a Massachusetts certificate of allergen awareness training by an allergen awareness training verification program recognized by the Department. The certificate will be valid for 5 years. (b) The certified food protection manager shall: 1. Demonstrate knowledge of major food allergens by posting the Massachusetts food allergen awareness training certificate; and 2. Ensure that employees are properly trained in food allergy awareness as it relates to their assigned duties.*
-
- 60 FRAM: MA 590.011 (A) Anti-Choking Procedures - Kitchen -**
- C** Observed no ChokeSave Certificate on site. If offering any seating for events, someone must be on site at all times that is ChokeSave certified. *Code: Every food establishment with any amount of seating shall have on its premises, when food is being served, an employee trained in a manual procedures approved by the state department of public health to remove food lodged in a person's throat. This will not apply to food establishments without seating such as to-go facilities.*

Compliance and Enforcement

PERMIT TO OPERATE

- 59 8-304.11 (K) Responsibilities of the Permit Holder - Kitchen -**
- C** Observed no signage in public view stating: "The last Inspection Report is available upon request." *Code: Upon acceptance of the permit issued by the RA, the permit holder in order to retain the permit shall notify customers that a copy of the most recent establishment inspection report is available upon request by posting a sign or placard in a location in the food establishment that is conspicuous to customers or by another method acceptable to the RA.*

Notes

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Notes

88 Notes - Kitchen -

N Reach in chest freezer observed not turned on. - General Notes.



88 Notes - Kitchen -

N Observed reach in refrigerator not turned on. - General Notes.



List 1

IN= In Compliance

OUT = Out of Compliance

NA = Not Applicable

NO= Not Observed

Permit up to date and posted?

IN

In compliance with allergen reg-poster?

OUT

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Written Menus /signs present (allergen)?	NA
Food Protection Manager Cert. Posted?	OUT
Certified Food Protection Manager's Certificate Posted?	OUT
Certified in MA Allergy Awareness and Certificate posted?	OUT
Staff trained in choke-save for every shift.	OUT
Ventilation Hood Inspections stickers up to date?	IN
Consumer Advisory Present if needed?	NA
Food Employee Reporting Agreement available?	OUT
Procedures outlines for vomit/diarrheal event?	OUT
All grease traps are operational and up to code?	NO

Temperatures

Area	Equipment	Product	Notes	Temps
Kitchen	Maytag Refrigerator	Ambient		43.3 °F

Temperatures in **RED** identify items in the temperature danger zone. See the report notes for specific details.

Notes

Observed Kitchen not in use during Inspection. PIC stated this Kitchen is only used for 1 event a year that takes place in June. PIC stated minimal food prep is performed during this 1 event.

Ended 11:31am.