



FOOD ESTABLISHMENT INSPECTION REPORT

R-10

BRAISED/Bird's Nest Italian Street
Food
41 Tiffany Circle
Millbury, MA

Inspection Number	Date	Time In/Out	Inspection Type	Client Type	Inspector		
02AAF	6/10/23	10:06 AM 10:19 AM	Routine	Mobile	K.Donahue		
Permit Number	Risk	Variance	Violation Summary:	Priority	Pf	Core	Repeat
2023-MF-06				0	0	0	

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

Good Retail Practices

Safe Food and Water					Proper Use of Utensils				
	IN	OUT	NA	COS		IN	OUT	NA	COS
30. Pasteurized eggs used where required	<input checked="" 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"/>
31. Water & ice from approved source	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	44. Utensils, equip. & linens: properly stored, dried & handled	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
32. Variance obtained for specialized processing methods	<input checked="" type="checkbox"/>	<input 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"/>
Food Temperature Control					46. Gloves used properly	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	IN	OUT	NA	COS	Utensils, Equipment and Vending				
33. Proper cooling methods used; adequate equip. for temp.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		IN	OUT	NA	COS
34. Plant food properly cooked for hot holding	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	47. All contact surfaces cleanable, properly designed,	<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"/>	48. Warewashing facilities: installed, maintained & used; test	<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"/>	49. Non-food contact surfaces clean	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Food Identification					Physical Facilities				
	IN	OUT	NA	COS		IN	OUT	NA	COS
37. Food properly labeled; original container	<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"/>
Prevention of Food Contamination					51. Plumbing installed; proper backflow devices	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	IN	OUT	NA	COS	52. Sewage & waste water properly disposed	<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"/>	53. Toilet facilities: properly constructed, supplied, & cleaned	<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"/>	54. Garbage & refuse properly disposed; facilities maintained	<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"/>	55. Physical facilities installed, maintained & clean	<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"/>	56. Adequate ventilation & lighting; designated areas use	<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"/>	60. 105 CMR 590 violations / local regulations	<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

Kath Donahue

K.Donahue

Melanie Logan

Melanie Logan - Expires
Certificate #:

Follow Up Required: ☐ Y Follow Up Date: _____

FOOD SAFETY INSPECTION REPORT

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BRAISED/Bird's Nest Italian Street
Food
41 Tiffany Circle

Inspection Number
02AAF

Date
6/10/23

Time In/Out
10:06 AM
10:19 AM

Inspector
K.Donahue

Inspection Report (Continued)

Repeat Violations Highlighted in Yellow

Notes

Notes

88

Notes - Establishment -

N Permit posted - General Notes.



88

Notes - Establishment -

N Allergen - General Notes.



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List 1

IN= In Compliance

OUT = Out of Compliance

NA = Not Applicable

NO= Not Observed

Is PIC on site

IN

Does establishment have copy of inspection policy

IN

Are the ServSafe, Choke Save and MA Allergy Cert. posted?

IN

Is a current permit posted?

IN

Are SOP's in place for cleaning up vomit/diarrheal incidents?

IN

Irreversible Test strips/device available?

IN

Handsinks accessible.

IN

Notification posted for most recent inspection report?

IN

Most recent Inspection report available?

IN

Hand washing sinks supplied with liquid soap, paper towels and trash

IN

Test kits on site for sanitizer.

IN

List 2

IN= In Compliance

OUT = Out of Compliance

NA = Not Applicable

NO= Not Observed

Are cold holding temps being followed?

IN

Food is protected from contamination

IN

Thermometers present in refrigerated and hot holding units

IN

Food storage in compliance. All product up off floor?

IN

Food Contact surfaces clean and sanitized?

IN

Sanitizer for wiping cloths available?

IN

Temperatures

Area	Equipment	Product	Notes	Temps
Establishment	Steam Table	Pulled pork		145 °F
Establishment	Reach-In Cooler			35 °F
Prep	Flip Top	Corn salad		35 °F

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Prep	Flip Top	Corn salad		35 °F
Establishment	Hot Box	Rice		140 °F

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

Notes

Awesome job, clean organized and all food safety protocols being followed.