## **Connecticut Department of Public Health**

## City of New Haven Health Department

Risk Category: 3	Food Establishmen	Revised 2/16/2023			
Establishment Type: Permane	ent				
Establishment:SILLIMAN DIN	ING HALL	Date and Time In: 2025-Mar-13 12:57			
Address: 509 COLLEGE ST, N	IEW HAVEN, CT	Date and Time Out:			
Town/City: New Haven		LHD: New Haven Health Department			
Permit Holder: Maureen O'Dor	nnell-Young	Purpose of Inspection: Routine			

Pern	nit Holder: Maur	een O'Donnell-Young Purpose of Inspection: Routine					
		FOODBORNE ILLNESS RISK FACTORS AND PUBLIC HEALTH INTERVENTIONS					
R	isk factors are imp	portant practices or procedures identified as the most prevalent contributing factors of foodborne illness or injury. <b>Interve</b> prevent foodborne illness or injury.	<b>ntions</b> are	conti	ol me	easure	es to
D	esignated complia	nce status (IN, OUT, N/A, N/O) marked for each numbered item   IN=in compliance   OUT=not in compliance   N/A=not	applicable	N/O	=not	obser	ved
		P=Priority item   Pf=Priority foundation item   C=Core item   V=Violation type Appropriate boxes marked for COS and/or R   COS=corrected on-site during inspection   R=repeat violation					
	Compliance	Supervision	P	Pf	С	R	cos
1	In	Person/Alternate Person in charge present, demonstrates knowledge and performs duties					
2	In	Certified Food Protection Manager for Classes 2, 3, & 4					
		Employee Health	P	Pf	С	R	cos
3	In	Management, food employee and conditional employee; knowledge, responsibilities and reporting					
4	In	Proper use of restriction and exclusion					
5	In	In Written procedure for responding to vomiting and diarrheal events					
		Good Hygienic Practices	P	Pf	С	R	cos
6	In	Proper eating, tasting, drinking, or tobacco products use					
7	In	No discharge from eyes, nose, and mouth					
		Preventing Contamination by Hands	P	Pf	С	R	cos
8	In	Hands clean and properly washed					
9	In	No bare hand contact with RTE food or a pre-approved alternative procedure properly followed					
10	In	Adequate handwashing sinks, properly supplied/accessible					
		Approved Source	P	Pf	С	R	cos
11	In	Food obtained from approved source					
12	N/O	Food received at proper temperature					
13	In	Food in good condition, safe, and unadulterated					
14	N/O	Required records available: molluscan shellfish identification, parasite destruction					
		Protection from Contamination	Р	Pf	С	R	cos
15	In	Food separated and protected					
16	In	Food-contact surfaces: cleaned and sanitized					
17	In	Proper disposition of returned, previously served, reconditioned, and unsafe food					
		Time/Temperature Control for Safety	P	Pf	С	R	cos
18	N/O	Proper cooking time and temperatures					
19	N/O	Proper reheating procedures for hot holding					
20	N/O						
21	N/O	Proper hot holding temperatures					
22	In	Proper cold holding temperatures					
23	N/O	Proper date marking and disposition					
24	N/A	Time as a public health control: procedures and records					
		Consumer Advisory	Р	Pf	С	R	cos
25	N/A	Consumer advisory provided: raw/undercooked food					
		Highly Susceptible Population	Р	Pf	С	R	cos
26	In	Pasteurized foods used; prohibited foods not offered					
		Food/Color Additives and Toxic Substances	Р	Pf	С	R	cos
27	N/A	Food additives: approved and properly used					
28	In	Toxic substances properly identified, stored and used					
		Conformance with Approved Procedures	Р	Pf	С	R	cos
29	N/A	Compliance with variance/specialized process/ROP criteria/HACCP Plan					

			GOOD RETAIL PRACTICES					
		·	ures to control the addition of pathogens, chemicals, and physical objects					
		numbered item is not in compliance   Appropria	ate boxes marked for COS and/or R   COS=corrected on-site during insp	ection   F				
00	Compliance		Safe Food and Water		Р	Pf	С	R/COS
30		Pasteurized eggs used where required						
31		Water and ice from approved source						
32	N/A	Variance obtained for specialized processing methods						
			Food Temperature Control		Р	Pf	С	R/COS
33		Proper cooling methods used; adequate equipment for temperature control						
34	N/O	Plant food properly cooked for hot holding						
35		Approved thawing methods used						
36		Thermometers provided and accurate						
		Food Identification				Pf	С	R/COS
37	Out	Food properly labeled; original container					1	
		Pro	evention of Food Contamination		P	Pf	С	R/COS
38		Insects, rodents, and animals not present						
39		Contamination prevented during food pre	paration, storage and display					
40		Personal cleanliness						
41		Wiping cloths: properly used and stored						
42		Washing fruits and vegetables						
			Proper Use of Utensils		Р	Pf	С	R/COS
43		In-use utensils: properly stored						
44		Utensils/equipment/linens: properly stored	d, dried, and handled					
45		Single-use/single-service articles: properly stored and used						
46		Gloves used properly						
			Utensils and Equipment		Р	Pf	С	R/COS
47	Out	Food and non-food contact surfaces clear	nable, properly designed, constructed, and used				1	
48		Warewashing facilities: installed, maintained and used; cleaning agents, sanitizers, and test strips available						
49	Out	Non-food contact surfaces clean					2	
		Physical Facilities			Р	Pf	С	R/COS
50		Hot and cold water available; adequate p	•		-		-	
51		Plumbing installed; proper backflow device						
52		Sewage and waste water properly disposed						
53		Toilet facilities: properly constructed, supplied, and clean						
54		Garbage and refuse properly disposed; fa						
55	Out	Physical facilities installed, maintained, a					1	
56	Out	Adequate ventilation and lighting; designate					'	
30		Natural rubber latex gloves not used per						
\r								
	tions Documen		Date Corrections Due	#				
Priority Item Violations		0						
		0						
Core Item Violations 2025-Jun-13 5								
Risk Factor/Public Health Intervention Violations 0								
Repeat Risk Factor/Public Health Intervention Violations 0			0					
Good Retail Practices Violations 4			4					
Requires Reinspection								
Permit Holder shall notify customers that a copy of the most recent report is available.								
Person in Charge: maureen odonnell young  Signature: 1500 July Date:  Inspector: Shellie Longo-Collins  Signature: July Date:					<b>Date</b> : 2025-Mar-13			
Inspe	Inspector: Shellie Longo-Collins Signature: All March			Date: 2025-Mar-13				

Appeal: The owner or operator of a food establishment aggrieved by this order to correct any inspection violation identified by the food inspector or to hold, destroy, or dispose of unsafe food, may appeal such order to the Director of Health, not later than forty-eight hours after issuance of such order.

## Food Establishment Inspection Report

## Inspection Report Continuation Sheet

LHD: New Haven Health Department Date: 2025-03-13						
Establi	Establishment: SILLIMAN DINING HALL Town: New Haven					
	TEMPERATURE OBSERVATIONS					
		Item/Location/Process	Тетр			
OBSERVATIONS AND CORRECTIVE ACTIONS						
Item #	Туре	Violations cited in this report must be corrected within the time frames below, or as stated in sec	ctions 8-405.11 and 8-406.11 of the food code.			
49	С	Undercarriage of self service beverage units unclean				
49	С	Fan grates in WIC unclean				
	C	ran grates in wic undean				
1						
48						
2						
3						
4						
5						
50						
50						
51						
10						
11						
52						
14						
16						
17						
18						
53						
54						
55	С	Floors under and hebind equipment unclean				
	C	Floors under and behind equipment unclean				
25						
26						
56						
29						
30						
31						
32						
33						
34						
35						
36						
37	С	Food product out of original containers not labeled				
38						
39						
40						
41						
42						
45						
46						
	_					
47	С	Broken rolling cart				

Comments:

Person in Charge Signature: MEDIALIP

Inspector Signature:

Date: 2025-Mar-13SILLIMAN DINING HALL3