

WCC FOOD PREMISES INSPECTION REPORT (Revised May 2011)

Officer		ID No.	09/05/14	Registration OK	Yes
Change of Occupier Details Form Submitted?					

Name of premises		ZORBA		Premises type		Restaurant	
Door No	35-36	Street	Leinster Terrace		Postcode	W2 3ET	
Building name						Parts	
Previous history Assessed?		<input checked="" type="radio"/> Yes	<input type="radio"/> No	Last inspection date	25/11/08		Action - Adv/Letter/Notice/Problems rectified? Yes/No
Date & Time of Inspection		26/10/11		Duration (mins)	90		Write up (mins)
Crown premises		Alert ?	<input checked="" type="radio"/> Y	Home authority/ Primary Authority? (please state)	N		PA - LBRO Web Check?
					None		Language spoken
Person(s) seen						Status	Director
Proprietor(s) state whether Ltd Co, PLC, partnership, sole trader		Le Paleyco Ltd 35-36 Leinster Terrace W2 3ET					
Address state whether Registered Office or home address		c/o Michael Filion Salisbury House 81 High St - Tottenham E16 5AS				Registered Number	
Phone/Fax No's		07339832					
e-mail address							
Opening Hours		12-00 to 12.00 midnight				Evening Opening Only?	

FOOD SAFETY RATING

Previous risk rating =	CLOSED	Score
Type of food & method of handling (5:10:30:40)		30
Method of processing high risk foods (20)		0
Consumers at risk (0:5:10:15)		5
Vulnerable group (22)		0
Food hygiene & safety (0:5:10:15:20:25)		15
Structure (including cleaning) (0:5:10:15:20:25)		10
Confidence in management (0:5:10:20:30)		30
Significance of risk (20)		0
Total =		90
Category =		B

HEALTH & SAFETY RATING

Previous H&S Risk Rating		
Inspection Completed	Y	N
N.B.		
If inspection not due: carry out hazard spot		
Completed	Y	N

LOW RISK LICENSING

Inspection Completed	Y	N
Referral Sent	Y	N

REVISIT NEEDED?

Yes	No	If no, for A/Bs discussed with ASM/SP?
Date of Revisit (s) Due	26/11/11	QA PASSED

Date Inputted into UNIFORM	26/10/11	Notices, Signed, Scanned and Idoxed?	Date- 18/11/11	Date: 19-11-12 QA Resigned: [Signature]
Date Sub to QA	18/11/11	Letter Idoxed?	Date- 18/11/11	

Not included scores on Doors X50TD

FOOD SAFETY

Description of food operation	Greek style restaurant cooking food from raw ingredients Also charcoal grill	
Main suppliers	21-23 Central Market Smithfield	Premier Fruits and Veg.
	27 West Central Market Smithfield	
	Martelli Smithfield	
Scale of distribution – Consider potential approval ie Processing POAO and distribution to other FBO's		
Off-site facilities	None	

Hazard Analysis

Documented Food Safety Management System/written procedures in place to demonstrate hazard control ?
 Yes ☒ No ☐ Is the system valid ie reference to scientific literature/taking into account worst case
 scenarios/ etc Yes ☒ No ☐ ?

Person responsible for food safety understands significant hazards? Yes ☒ No ☐ Unable to Question ☐

Analysis of hazards? Yes ☒ No ☐ Part ☐ Implementation of controls? Yes ☐ No ☐ Part ☒

Monitoring of controls ? Yes ☒ No ☐ Part ☐

Appropriate corrective action taken? Yes ☐ No ☐ Part ☒ Review Required? ☐

Comments-

SF BOD Safe Methods Completed

Daily Diary up to date

Supplemented by Temperature Records + Chain of Custody

Previous Hazard analysis advice? None ☐ Letter ☐ Notice ☐ Date

Previously Prohibited Person

Are there any special high risk processes? ☐ Yes ☒ No

Vacuum Packing/Sous-Vide
Raw meat / fish
Lightly cooked food

Cook-Chill/Freeze
Aseptic Packaging
Use of Raw Egg

Please specify which activity _____

If Vacuum Packing – what Foods – Raw or RTE – please list:

Number and location of vacuum packers: _____

If RTE food is it subject to further heat treatment? _____

Vulnerable Groups? Yes ☐ No ☒ Details: _____

The proprietor provided the following documents:

Hazard Analysis / Assured Safe Catering / S.F.B.B. ☒

Food Hygiene Training Records ☐

Pest Control Reports ☒

Delivery Check Records ☐

Temperature Control Logs ☒

Cleaning Schedule ☒

Other -

Use this space for additional notes, diagrams of food preparation areas, product flow, HACCP flow charts, details of CCPs, etc.

Layout, design &
Construction

Enter in each box one of the following: C = Compliance; N = Non-Compliance; N/A = Not Applicable.

Enter a T where a temp has been taken with a WCC probe and describe the circumstances i.e. T -air temperature display chiller 5.2°C

	SCORE	COMMENTS		
Training / Supervision / Instruction	C	[redacted] has level 3. Employs 2 staff - No training records - supervision		
Cross contamination	N	Raw meat on open shelf in cold store too close to box of fruit on neighbouring shelf. + uncooked raw chicken is present.		
Contamination (Chemical/Physical)	C			
Personal Hygiene (inc. Fitness to Work)	C	Clean overalls		
Delivery	C	Refrigerated dairy products delivered in fridge van		
Dry / Ambient Storage	C	Overstocked. Most in containers with lids		
Chilled / Frozen Storage	C	Temperatures checked. Display chiller 7°C + 6°C.		
Defrosting	C	Defrosting in fridge or in sink keeps records of time		
Cooking	C		Cooling	cool cooked meat/birds in small containers
Reheating	C			
Cold / Hot display	C	Display 7°C + 6°C		
Washbasins & Water Supply	C	Hot + cold soap paper towels	Hot Water?	Yes
Sinks	C	H + C		
WC's	C			
Cleaning	C	overstocked makes cleaning difficult in basement		
Pest control	N	No signs of pests mice Quickkill Pest Co. Lot of flies heater not working		
Food Waste / Refuse	C			
Equipment	C			
Structure / Repair	N	(Sink surround grouting incomplete and holed)		
Drainage	C	Basement wall plaster damaged and cable trunking damaged by contractor)		
Lighting / Ventilation	C			
Transport / delivery Vehicles	N/A			

FOOD STANDARDS

(NB! it is not necessary to inspect every category on this list. At least two areas should be commented on)

	Score	COMMENTS
Marketing standards Description Presentation Packaging Labelling QUID Claims Advertising Authenticity <u>Stock Rotation</u> Composition (inc. Nature/Subst./Quality) Glycemic Index		Eggs in date aware of Use By + Best Before.
Contaminants Allergens Separation Additives GM Materials & articles in contact with food Residues		
Traceability & recall procedures		
Customer complaints		
Samples		
Illegally imported/produced foods Healthmarks CVEDs Labelling/Composition		Health marks on meat + fish
Other aspects		

SAMPLING

Follow-up food sampling recommended? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	If yes state reasons why: <hr/> <hr/> <hr/>
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Other comments _____

No. of staff employed on site ☒ 2 Approx. No. of employees in UK ☐ Approx. No of public per day ☐

Name of any staff representative seen _____

Lead authority? Yes ☐ No ☐ If Yes, state name _____

List of areas visited _____

INSPECTION OUTCOME/RECOMMENDED ENFORCEMENT ACTION (FOOD / H&S)

Letter ☒ FS Improvement Notice ☐ Seizure ☐ Detention ☐ Prohibition (Food) ☐

Other ☐ (please state) Revisit January

Discussed Proposed Enforcement Action with:
PROPRIETOR / MANAGER / PERSON IN CHARGE*

*delete as appropriate

YES ☐ NO ☐ Reason if no: _____



City of Westminster

Date: 26/10/11

Time: 3.30

Contact Number:

0207 641 3028

Trading name & address of the business	Name of the Food Business Operator	Person seen/interviewed	Type of business
ZORBA Leinster Terrace	Le Paleyco Ltd	[Redacted]	Restaurant
Specific legislation under which inspection conducted: <input type="checkbox"/> Health and Safety at Work etc. Act 1974 and associated legislation <input checked="" type="checkbox"/> Food Safety Act 1990, Food Hygiene (England) Regulations 2006 <input checked="" type="checkbox"/> Regulation (EC) No. 852/2004, Regulation (EC) No. 853/2004			
Areas inspected: Restaurant			
Procedures/Records/Documents examined: Pest Control. Safe Food Better Business Temperature Records			
Sample procured (e.g. description, batch number) None			
Summary of matters discussed at closing meeting: ① Better separation of raw meat in cold store ② Staff training records ③ Insectocutor repair			
Follow up action taken by the local authority: <input type="checkbox"/> No further action <input checked="" type="checkbox"/> Letter <input type="checkbox"/> Improvement notice/Hygiene Improvement Notice <input type="checkbox"/> Prohibition Notice/Hygiene Emergency Prohibition Notice			

This report only covers the areas inspected at the time of visit. It does not include compliance with any provision of the above Act(s) or any Regulations under them. If you disagree with the action taken by the officer, please contact the Team Leader for the North/Central/ South Team at the address below.

This is not a notice requiring works to be carried out.

Issued by:

Signature:

Designation:

Date:

Received by:

Date: