Retail Food Establishment Inspection Report

First aid kit
Allergy policy
Vomit clean up
Employee health

	ate:	2 / 0		<u> </u>		e/Permit						Est. Type Risk Category	Page 1 of 2	
8/26/2024 12:00 12:35 FOOD Purpose of Inspection: 1-Routine 2-Follow Up 3-Complain Establishment Name: Contact/Owner Na							00/3 4-Investigation				_			
								4-Inv€	estiga	ation	1	5-CO/Construction 6-Other TOTAL/SCC * Number of Repeat Violations:	RE	
_	ISD hvsic	_ `			e Williams Elementary) Pest control:		11	1		I C		✓ Number of Violations COS: O/100	/A	
					Rockwall. TX linternal/monthl	У		ood ardian/5	-2024			t to send/refer to Teddy Follow-up: Yes No		
М					status: Out = not in compliance Points in the OUT box for each numbered item Ma	NO = no ark '√' a c						policable $COS = corrected on site R = repeat violation W-Wat ox for IN, NO, NA, COS Mark an in appropriate box for R$	ch	
					Priority Items (3 Points) violati		uire 1	Imme	liate	Cor	rect	• • • • • • • • • • • • • • • • • • • •		
O U		iance N O	Sta N A	C O	Time and Temperature for Food Safety	R		Compl O I U N	liance N O	Stat N A	tus C O	Employee Heelth	R	
T		U	A	s	(F = degrees Fahrenheit) 1. Proper cooling time and temperature			T	U	A	s	Employee Health 12. Management, food employees and conditional employees;		
	~				1. Troper cooming time and temperature			~				knowledge, responsibilities, and reporting		
	~				2. Proper Cold Holding temperature(41°F/ 45°F)			.,				13. Proper use of restriction and exclusion; No discharge from eyes, nose, and mouth	1	
					3. Proper Hot Holding temperature(135°F)							eyes, nose, and mount		
	~											Preventing Contamination by Hands		
	~				4. Proper cooking time and temperature			~				14. Hands cleaned and properly washed/ Gloves used properly gloves used		
	~				5. Proper reheating procedure for hot holding (165°F in 2 Hours)	2		~				T5. No bare hand contact with ready to eat foods or approved alternate method properly followed (APPROVED Y N)		
	~				6. Time as a Public Health Control; procedures & record	is						Highly Susceptible Populations		
				<u> </u>				T				16. Pasteurized foods used; prohibited food not offered		
					Approved Source			~				Pasteurized eggs used when required liquid pasteurized eggs only		
					7. Food and ice obtained from approved source; Food in good condition, safe, and unadulterated; parasite									
	'				destruction LaBatt							Chemicals		
	~				8. Food Received at proper temperature			_				17. Food additives; approved and properly stored; Washing Fruits & Vegetables		
	<u> </u>				checked at receipt		_					18. Toxic substances properly identified, stored and used	-	
				l	Protection from Contamination 9. Food Separated & protected, prevented during food			~				10. 10 Me substances properly identified, stored and used		
	~				preparation, storage, display, and tasting							Water/ Plumbing		
	~				10. Food contact surfaces and Returnables ; Cleaned and Sanitized at <u>200</u> ppm/temperature		Ī	~				19. Water from approved source; Plumbing installed; proper backflow device	Т	
					11. Proper disposition of returned, previously served or reconditioned discarded			~				20. Approved Sewage/Wastewater Disposal System, proper disposal		
	_				5.1.5 C 5.1. 5. 5 G.									
					Priority Foundation Items (2							rrective Action within 10 days		
O U T	I	N O	N A	COS		Points)	1	O I U N	Req N O	vuire N A	C 0	rrective Action within 10 days Food Temperature Control/ Identification	R	
O U T		N O	N A		Priority Foundation Items (2 Demonstration of Knowledge/ Personnel 21. Person in charge present, demonstration of knowled and perform duties/ Certified Food Manager/ Posted	R	1	0 I	N	N	С		R	
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Retail Food Establishment Inspection Report

Received by: (signature) Valerie Simmons	Print: Valerie Simmons	Title: Person In Charge/ Owner Manager
Inspected by: Christy Cortez, RS (signature)	Print: Christy Cortez, RS	Business Email:

Form EH-06 (Revised 09-2015)

	ment Name: Nebbie Williams Elementary)	Physical A		City/State: Rockwall	, TX	License/Permit # FOOD6673	Page <u>2</u> of <u>2</u>			
			TEMPERATURE OBSERVAT							
Item/Loc	ation	Temp F	Item/Location	· F	Item/Loca	tion	Temp			
	g line/steam table/chicker	157	chicken cooked	200						
	eak fingers	139	WIC/shredded cheese	. 0						
	shed potatoes	166	cut lettuce	39						
mixe	ed vegetables	159	WIF ambient	-10						
cold we	lls/peaches only/just opened									
pass thre	ough hot holding/steak fingers	148								
pass t	hrough cooler/ambient	36								
Milk o	cooler open/ambient	39								
Itam			SERVATIONS AND CORRECTIVE							
Item Number	AN INSPECTION OF YOUR ESTABLISHMENT HAS BEEN MADE. YOUR ATTENTION IS DIRECTED TO THE CONDITIONS OBSERVED AND NOTED BELOW:									
	Line hand sink 100+	-F equip	oped							
	Sani buckets at 200	ppm qu	ats							
W			ery 2 to 3 hours or as ne	cessary	to requ	uired ppm				
	-		ecords kept and current	•	<u> </u>					
	· · · · · · · · · · · · · · · · · · ·	-	of each cooling and hot		nit					
	Sanitizer logs kept o									
	•		•							
	Allergy records on file per student Menus posted and on website									
	Dishwasher sanitizing per Temp strips									
	warewash hand sink 109F equipped									
	Receiving records and temps on file/current									
	3 comp sink 120 F									
	Calibration logs kep	t for dio	ital thermos							
	No raw meat or raw									
	Liquid pasteurized e									
W			s or under running cool v	vater only	v					
				rator orn	<i>)</i>					
W	Back hand sink 105+F equipped Watch for any chipped or rusty grates (in milk cooler)									
	Ice machine clean/scoop stored correctly									
	Disposable utensils and washable trays used									
	Disposable delisiis and washable days used									
	hv.		Print:		Ī	Title: Person In Charge/	0			
Received			1 1 1111.			Tiue, I erson in Charge/				
Received (signature)			Valerie S	immo	ns	Manager	Owner			