Follow-up fee of \$50.00 is required after 1st Followup

Retail Food Establishment Inspection Report City of Rockwall

✓ First aid kit
Allergy policy/training
Allergy policy/training Vomit clean up Employee health
Employee health

Date: 07/18/202	Time in: 4 5:18	Time out: 6:16	Fs 9	Permit # 271						Food Managers 1 when open 13 Page 1 of 2	2_			
Purpose of Insp	ection: 1-Routine	2-Follow U	p 3-Comp	laint	4-I	Invest	iga	tion		5-CO/Construction 6-Other TOTAL/SCOI	RE			
Establishment Name: Baylor Scott and white Emergency			Emerus	Contact/Owner Name:						* Number of Repeat Violations: Y Number of Violations COS: etrap / waste oil Followane: Vest 3/97/A	Δ			
Physical Address 1975 alpha	Rentokil monthly Na Na No						No No	<u> </u>						
Mark the appropri	te points in the OUT box fo	or each numbered it	tem Mar		propr	iate bo	x fo	r IN,	NO	plicable $COS = corrected on site NA, COS $:h			
Compliance Statu	_	ority Items (3	Points) violatio	ns Requi	_	<i>medic</i> omplia				ive Action not to exceed 3 days				
O I N N U N O A	Time and Temperature for Food Safety (F = degrees Fahrenheit)			R	O U T	ī	N	N	C O S	Employee Health	R			
	Proper cooling time and temperature					/			5	12. Management, food employees and conditional employees; knowledge, responsibilities, and reporting				
	2. Proper Cold Holding temperature(41°F/ 45°F) See					/				13. Proper use of restriction and exclusion; No discharge from eyes, nose, and mouth				
	3. Proper Hot Holding temperature(135°F)				To post at hand sinks Preventing Contamination by Hands									
	4. Proper cooking time and temperature					/	14. Hands cleaned and properly washed/ Gloves used properly							
	5. Proper reheating pro Hours)	ocedure for hot ho	olding (165°F in 2			~				15. No bare hand contact with ready to eat foods or approved alternate method properly followed (APPROVED Y. N.) Gloves				
	6. Time as a Public He	ealth Control; prod	cedures & records							Highly Susceptible Populations				
	Aj	pproved Source				T		/		16. Pasteurized foods used; prohibited food not offered Pasteurized eggs used when required Precooked				
	7. Food and ice obtained from approved source; Food in good condition, safe, and unadulterated; parasite destruction Yellow													
	8. Food Received at pr To check	roper temperature						/		17. Food additives; approved and properly stored; Washing Fruits & Vegetables				
		on from Contami			3				/	18. Toxic substances properly identified, stored and used Removed label for 146! At three comp				
	9. Food Separated & protected, prevented during food preparation, storage, display, and tasting							Water/ Plumbing						
	10. Food contact surfaces and Returnables; Cleaned and Sanitized at 200 ppm/temperature Within rangeb					~				19. Water from approved source; Plumbing installed; proper backflow device City inspected				
	11. Proper disposition reconditioned Disca	of returned, previ arded anythir	iously served or ng from room	s		~				20. Approved Sewage/Wastewater Disposal System, proper disposal				
0 I N N	Pr	iority Founda	tion Items (2 I	Points) v	iolati O			uire N	Cor	rective Action within 10 days	R			
U N O A	Demonstratio	on of Knowledge/			U T			A	o s	Food Temperature Control/ Identification	K			
W	21. Person in charge present, demonstration of knowledge, and perform duties/ Certified Food Manager (CFM) 1 duty when kitchen is officially open 21. Person in charge present, demonstration of knowledge, and perform duties/ Certified Food Manager (CFM) Maintain Product Temperature All individual					Maintain Product Temperature All individual								
	22. Food Handler/ no t 13 including nurses	unauthorized pers	ons/ personnel				(28. Proper Date Marking and disposition All frozen or individual						
	Safe Water, Reco	ordkeeping and l Labeling	Food Package			~			29. Thermometers provided, accurate, and calibrated; Chemical/ Thermal test strips See					
	23. Hot and Cold Water See	_	_							Permit Requirement, Prerequisite for Operation				
	24. Required records a destruction); Packaged Commercial		ck tags; parasite				•	/		30. Food Establishment Permit (Current/ insp sign posted)				
	Conformance 25. Compliance with V	with Approved l								Utensils, Equipment, and Vending 31. Adequate handwashing facilities: Accessible and properly				
	HACCP plan; Varianc processing methods; m	ce obtained for spe	ecialized			~				supplied, used				
		nsumer Advisory	7			~				32. Food and Non-food Contact surfaces cleanable, properly designed, constructed, and used Watch				
	26. Posting of Consum foods (Disclosure/Ren Ingredients per . La	ninder/Buffet Plat				/				33. Warewashing Facilities; installed, maintained, used/ Service sink or curb cleaning facility provided See 18				
0 I N N	Core Items (1 Poi	int) Violations	Require Correcti	ve Action	Not		_	_	Day C	ys or Next Inspection , Whichever Comes First	R			
U N O A	Prevention	of Food Contam		K	U T				o s	Food Identification				
	34. No Evidence of Instantinals Wachb				W	/				41.Original container labeling (Bulk Food) To post employee health sign				
	35. Personal Cleanline									Physical Facilities				
	36. Wiping Cloths; pro	operly used and st	ored			~				42. Non-Food Contact surfaces clean Watch				
	37. Environmental contamination					~	Ī		1	43. Adequate ventilation and lighting; designated areas used				
38. Approved thawing method COOK						/				44. Garbage and Refuse properly disposed; facilities maintained				
	Prop	per Use of Utensi	ls			~				45. Physical facilities installed, maintained, and clean Watch				
	39. Utensils, equipmer dried, & handled/ In u					~				46. Toilet Facilities; properly constructed, supplied, and clean Equipped				
	40. Single-service & si	ingle-use articles;	properly stored							47. Other Violations				

Retail Food Establishment Inspection Report

City of Rockwall

Received by: Christy Spencer	Print:	Title: Person In Charge/ Owner
Inspected by: Kelly Kirkpatrick RS	Print:	Business Email:

Form EH-06 (Revised 09-2015)

Establi 1	mont Nomo	Di' 1	A delarge.	C:t-/Ct-	Time-D VII	Dona O. C.C.			
Establishment Name: Baylor Scott & white emergency		Physical Address: 1975 alpha drive		City/State: Rockwall		License/Permit # Page 2 of 2 FS9271			
,	<u> </u>	1010	TEMPERATURE OBSER						
Item/Loc	ation	Temp F	Item/Location	Temp F	Item/Location	Temp 1			
Upright freezer		6.7							
11,	oright cooler	36							
Upright cooler		30							
						+			
		O	BSERVATIONS AND CORRE	CTIVE ACTION	S				
Item Number	AN INSPECTION OF YOUR ES NOTED BELOW: temps in F	TABLISHM	ENT HAS BEEN MADE. YOUR AT	ΓΕΝΤΙΟΝ IS DIREC	CTED TO THE CONDITIONS OBS	ERVED AND			
	Hot water 142 / at han	deink							
	Freezer HTT	Iddilik							
	Thermo in Cooler nea	r door							
	Nsf approved thermo		temn						
	Using 165! F as the ta		•						
			precooked meals rehe	ated to 165 F	hofore serving				
	Sanitizer in spray bott	•		aled to 100 i	belote serving				
18000	, ,		er indicates it is 146 and	t so does info	ormation noster				
Cos			sanitizer - within range s						
- 000			ticker on the dispenser a						
	•		·		Joins to addition				
	Dishmachine is low temp chlorine unit / test strips on site Logs in walls for checking three compAnd Dishmachine I								
	Logo III Wallo for onco	ang ano	o comprana Biominacimi	,					
	Plans to switch to deli	verv ser	vice under review ex do	or dash					
	i iano to oviton to don	70. y 00.	The analy review ex de	0. 000.					
!!	Kitchen couldBe open	ed at an	y time during which a fo	od manager	should be on site				
ij			d be opened when not p		<u> </u>				
• •	Fh on site provided me			- Idi II I I I					
	p								
Received			Print:		Title: Person In Char	ge/ Owner			
(signature)	Isaura Lan	aver	'de						
Inspected	l bv:		Print:						
(signature)	Kelly Kirkpo	utríck	VRS		Camplage V M	# collected			
					Samples: Y N	" concettu			