

Followup fee of \$50.00 after First Followup

Retail Food Establishment Inspection Report

City of Rockwall

- First aid kit
- Allergy policy
- Vomit clean up
- Employee health

Date: 12/11/23	Time in: 11:15	Time out: 12:35	License/Permit # FS-8972	CPFM 2	Food handlers 4	Page <u>1</u> of <u>2</u>
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Purpose of Inspection: <input checked="" type="checkbox"/> 1-Routine	<input type="checkbox"/> 2-Follow Up	<input type="checkbox"/> 3-Complaint	<input type="checkbox"/> 4-Investigation	<input type="checkbox"/> 5-CO/Construction	<input type="checkbox"/> 6-Other	TOTAL/SCORE
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Establishment Name: Lakeshore Assisted Living	Contact/Owner Name: Jenni Knutson	Number of Repeat Violations: <input checked="" type="checkbox"/>	Number of Violations COS: <input type="checkbox"/>	<b>10/90/A</b>
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Physical Address: 5250 Medical Dr Rockwall, Tx	Pest control : ABC Pest 11/27/23	Hood American 8/2023	Grease trap / waste oil LES 11/9/23 1500g	Follow-up: Yes <input type="checkbox"/> No <input type="checkbox"/>
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Compliance Status: Out = not in compliance IN = in compliance NO = not observed NA = not applicable COS = corrected on site R = repeat violation W= Watch  
 Mark the appropriate points in the OUT box for each numbered item Mark '✓' a checkmark in appropriate box for IN, NO, NA, COS Mark an X in appropriate box for R

**Priority Items (3 Points) violations Require Immediate Corrective Action not to exceed 3 days**

Compliance Status						Compliance Status					
OUT	IN	NO	NA	COS	R	OUT	IN	NO	NA	COS	R
<b>Time and Temperature for Food Safety</b> (F = degrees Fahrenheit)						<b>Employee Health</b>					
	✓					✓					
3						✓					
	✓					<b>Preventing Contamination by Hands</b>					
		✓				✓					
			✓			✓					
	✓					<b>Highly Susceptible Populations</b>					
<b>Approved Source</b>						✓					
	✓					<b>Chemicals</b>					
	✓					✓					
<b>Protection from Contamination</b>						✓					
	✓					<b>Water/ Plumbing</b>					
	✓					✓					
	✓					✓					

**Priority Foundation Items (2 Points) violations Require Corrective Action within 10 days**

Compliance Status						Compliance Status					
OUT	IN	NO	NA	COS	R	OUT	IN	NO	NA	COS	R
<b>Demonstration of Knowledge/ Personnel</b>						<b>Food Temperature Control/ Identification</b>					
	✓					✓					
	✓					✓					
<b>Safe Water, Recordkeeping and Food Package Labeling</b>						✓					
	✓					<b>Permit Requirement, Prerequisite for Operation</b>					
	✓					✓					
<b>Conformance with Approved Procedures</b>						<b>Utensils, Equipment, and Vending</b>					
	✓					2					
<b>Consumer Advisory</b>						2					
	✓					✓					

**Core Items (1 Point) Violations Require Corrective Action Not to Exceed 90 Days or Next Inspection , Whichever Comes First**

Compliance Status						Compliance Status					
OUT	IN	NO	NA	COS	R	OUT	IN	NO	NA	COS	R
<b>Prevention of Food Contamination</b>						<b>Food Identification</b>					
1						✓					
	✓					<b>Physical Facilities</b>					
	✓					1					
	✓					1					
	✓					✓					
<b>Proper Use of Utensils</b>						1					
	✓					✓					
1						W					

