

# Retail Food Establishment Inspection Report

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

Date: <b>6/28/2024</b>	Time in: <b>3:15</b>	Time out: <b>5:00</b>	License/Permit # <b>FS-9257</b>	Est. Type	Risk Category <b>High</b>	Page <u>1</u> of <u>2</u>
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<b>Purpose of Inspection:</b> <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							<b>TOTAL/SCORE</b>
Establishment Name: <b>Rock Ridge Assisted Living &amp; Memory Care</b>			Contact/Owner Name:		* Number of Repeat Violations: _____ ✓ Number of Violations COS: _____		<b>10/90/A</b>
Physical Address: <b>720 E Ralph Hall Rockwall, TX</b>			Pest control : <b>Terminix/6-28-2024/</b>	Hood <b>HydroPlus/5-2024</b>	Grease trap : <b>America's /3000gal/6-4-2024</b>	Follow-up: Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	

**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>					
	✓						✓				
	✓						✓				
		✓				<b>Preventing Contamination by Hands</b>					
		✓					✓				
		✓					✓				
	✓					<b>Highly Susceptible Populations</b>					
<b>Approved Source</b>							✓				
3				✓		<b>Chemicals</b>					
	✓						✓				
<b>Protection from Contamination</b>						3					
	✓					<b>Water/ Plumbing</b>					
W						W					
	✓						✓				

### 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>					
	✓						✓				
	✓					2					
<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>					
	✓						✓				
<b>Consumer Advisory</b>							✓				
	✓					W					

### 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							✓				
W				✓		<b>Physical Facilities</b>					
	✓					1					
	✓						✓				
	✓						✓				
<b>Proper Use of Utensils</b>							✓				
	✓						✓				
	✓						✓				

**Retail Food Establishment Inspection Report**

Received by: (signature) <i>Danna Hadley</i>	Print: <b>Danna Hadley</b>	Title: Person In Charge/ Owner <b>Manager</b>
Inspected by: (signature) <i>Christy Cortez, RS</i>	Print: <b>Christy Cortez, RS</b>	Business Email:

Form EH-06 (Revised 09-2015)

Establishment Name: Rock Ridge Assisted Living & Memory Care	Physical Address: <b>720 E Ralph Hall</b>	City/State: <b>Rockwall, TX</b>	License/Permit # <b>FS-9257</b>	Page <u>2</u> of <u>2</u>
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**TEMPERATURE OBSERVATIONS**

Item/Location	Temp F	Item/Location	Temp F	Item/Location	Temp F
3 door cooler/tomatoes	41				
strawberries for reference	41				
sour cream	41				
cheese	41				
reach in cooler/milk	41				
3 door freezer	2				
3 door freezer	-10				

**OBSERVATIONS AND CORRECTIVE ACTIONS**

Item Number	Observation/Action
	AN INSPECTION OF YOUR ESTABLISHMENT HAS BEEN MADE. YOUR ATTENTION IS DIRECTED TO THE CONDITIONS OBSERVED AND NOTED BELOW:
	Popcorn/ self serve or served by employees/cleaned nightly
	Bistro hand sink 100F equipped
	Self serve coffee and water in closed containers
	Commercial creamer and sugar, individually packaged, shelf stable
W	Tables are preset/ must wash everything on table after each meal
W	Will need to protect tables, utensils during non eating time
	Each client has a allergy record on file
	Menus posted on bulletin board
	3 comp sink 110F
W	right spigot is missing/no way to fill 3rd sink/part ordered/will check at followup
	Warewash hand sink 100+F
	Dishwasher sanitizing at 100ppm chlorine
	Prep hand sink 109F equipped
28	Need to date mark TCS foods once opened/to discard at day 7
42	Some minor cleaning in freezer
18	One sani bucket at 0ppm/one way over 400ppm/COS to 200ppm
	Dispenser at 3 comp sink is for entire sink per one pump
	Suggested using Steramine tabs for sanitizer buckets to avoid mising incorrectly at 3 comp
7	Neer to watch for dented cans/removed several/not for use
	Discussed cooling down temps/right now they don't have leftovers
W	Store personal items low and separate, packaged candy over prep table/COS
34	1 fly
	Gloves used for all prep and RTE

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Inspected by: (signature) <i>Christy Cortez, RS</i>	Print: <b>Christy Cortez, RS</b>	Samples: Y N # collected

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