\$50.00 reinspection fee 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:	)5/2	200	22	Time in:	Time out: <b>9:29</b>	Food		6					volunteers 7 Food Managers 1 Page 1 of 2	<u>.</u>		
				2-Follow Up	2-Follow Up 3-Complaint 4-In							5-CO/Construction 6-Other TOTAL/SCOR	E			
Establishment Name: Contact/Owr Rockwall county jail Rockwall of					ontact/Owner N							* Number of Repeat Violations: ✓ Number of Violations COS:	- 10 - 14			
Physical Address: TL Townsend				<del>, ,</del>	Pest control : Denco /monthly (will email)								e trap : Follow-up: Yes	١		
	Com	ıpliaı		tatus: Out = not in co	ompliance IN = in comp		not o			N/	-		pplicable COS = corrected on site R = repeat violation W-Watch	n		
Mark	the ap	prop	riate	points in the OUT box fo	r each numbered item	Mark \							D, NA, COS Mark an V in appropriate box for R vive Action not to exceed 3 days			
Comp	liance N	e Sta	tus C		•		R	_	mpli		e Sta			R		
U N T	$\begin{bmatrix} \mathbf{N} & \mathbf{O} & \mathbf{A} & \mathbf{O} \\ \mathbf{S} & \mathbf{S} \end{bmatrix}$ Time and Temperature for Food Safety (F = degrees Fahrenheit)					U T	N	Employee Health								
w			1. Proper cooling time and temperature Addressed opens beans / discarded					~				12. Management, food employees and conditional employees; 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			
	See  3. Proper Hot Holding temperature(135°F)					Posted by hand. Sink						_				
	V			4. Proper cooking time				Preventing Contamination by Hands  14. Hands cleaned and properly washed/ Gloves used properly washed/ Prope								
	~				•	g (165°F in 2			•				15. No bare hand contact with ready to eat foods or approved			
	5. Proper reheating procedure for hot holding (165°F in 2 Hours)							~			alternate method properly followed (APPROVED Y. N. )  Gloves					
	/			6. Time as a Public He Prep only	alth Control; procedure	res & records							Highly Susceptible Populations			
				Aį	oproved Source				/				Pasteurized foods used; prohibited food not offered     Pasteurized eggs used when required			
				7. Food and ice obtain									Hard boiled eggs / no scrambled etc			
<b>~</b>	1			good condition, safe, a destruction Be. W	nd unadulterated; para Keith	site							Chemicals			
	,			8. Food Received at pr									17. Food additives; approved and properly stored; Washing Fruits			
				Checking							<b>/</b>		& Vegetables Canned only  18. Toxic substances properly identified, stored and used			
				9. Food Separated & p	n from Contamination			3	Bleach solution too strong / diluted to 100 ppm							
~	1			preparation, storage, di		ring rood							Water/ Plumbing			
/	,			10. Food contact surfact Sanitized at 100	ces and Returnables ; Coppm/temperature	Cleaned and ee 18			/			-	19. Water from approved source; Plumbing installed; proper backflow device			
				11. Proper disposition									20. Approved Sewage/Wastewater Disposal System, proper			
	•			reconditioned					_				disposal			
0 1	N	N	C		•		nts) vi	0	I	N	N	С	rrective Action within 10 days	R		
U N T	0	A	o s	21. Person in charge p	n of Knowledge/ Pers			U T	N	0	A	o s	Food Temperature Control/ Identification			
<b>~</b>				and perform duties/ Ce				W					Proper cooling method used; Equipment Adequate to     Maintain Product Temperature Will adjust method of cooling			
~	•			22. Food Handler/ no u	inauthorized persons/ p	personnel			~				28. Proper Date Marking and disposition Good			
				Safe Water, Reco	ordkeeping and Food Labeling	Package			/				29. Thermometers provided, accurate, and calibrated; Chemical/ Thermal test strips			
	,			23. Hot and Cold Water	9	pressure, safe							Permit Requirement, Prerequisite for Operation			
				24. Required records a		gs; parasite							30. Food Establishment Permit (Current/ insp sign posted )			
		•		destruction); Packaged	Food labeled								Posted			
				Conformance 25. Compliance with V	with Approved Proce Variance, Specialized P								Utensils, Equipment, and Vending  31. Adequate handwashing facilities: Accessible and properly			
		~		HACCP plan; Varianc processing methods; m					~				supplied, used Equipped			
				Cor	nsumer Advisory								32. Food and Non-food Contact surfaces cleanable, properly			
				26 P. d. 60				W					designed, constructed, and used  New shelving with new kitchen  33. Warewashing Facilities; installed, maintained, used/			
/	•			26. Posting of Consum foods (Disclosure/Rem Cooking to required	ninder/Buffet Plate)/ Al	llergen Label		2				~	Service sink or curb cleaning facility provided  Dishmachine not reaching 160 SR for dish			
							Action						tys or Next Inspection , Whichever Comes First			
O I U N T	N O	N A	C O S	Prevention	of Food Contaminati	ion	R	O U T	I N	N O	N A	C O S	Food Identification	R		
1	1		S .	34. No Evidence of Instantials	sect contamination, rod	lent/other		-		~		Б	41.Original container labeling (Bulk Food)			
~	·			35. Personal Cleanline	ss/eating, drinking or to	obacco use							Physical Facilities			
-	,			36. Wiping Cloths; pro	perly used and stored				/				42. Non-Food Contact surfaces clean New facility			
W				37. Environmental con Ice in wif will be a	tamination ddressed with ne	ew remodel			~				43. Adequate ventilation and lighting; designated areas used New facility coming			
	~			38. Approved thawing	method				/				44. Garbage and Refuse properly disposed; facilities maintained			
					er Use of Utensils				~				45. Physical facilities installed, maintained, and clean New facility coming			
	,			39. Utensils, equipmendried, & handled/ In u	it, & linens; properly use utensils; properly us	sed, stored,			/				46. Toilet Facilities; properly constructed, supplied, and clean			
	,			Watch 40. Single-service & si and used	ngle-use articles; prop	erly stored	$\vdash$			<u>,                                    </u>			47. Other Violations			
ľ				and used												

## Retail Food Establishment Inspection Report

## City of Rockwall

Received by: Magdalena Lozano	Print:	Title: Person In Charge/ Owner CFM
Inspected by: Kelly kirkpatrick RS	Print:	Business Email:

Form EH-06 (Revised 09-2015)

Fetablish:	ment Name:	Physical A	Addrass	City/State:	License/Permit #	Page 2 of 2						
	wall county jail		wnsend	Rockwall	Food 5166	Page 2 01 2						
Item/Loc	otion	Town F	TEMPERATURE OB  Item/Location		aatian	Town I						
	auon	Temp F		Temp F Item/L	<u>ocauon</u>	Temp I						
Wic			Wif	-2.33								
	Milk	39										
G	reen beans	39										
Bean	s from room temp	53										
(Discus	sed 4 hrs cooking from 70)											
( Remove	d and placed into wic at 4:00 am)											
		OI	SERVATIONS AND COR	RRECTIVE ACTIONS								
Item Number	AN INSPECTION OF YOUR ESTABLISHMENT HAS BEEN MADE. YOUR ATTENTION IS DIRECTED TO THE CONDITIONS OBSERVED AND NOTED BELOW: all temps F											
	Hot water 136 F Using raw ground beef - cooking to 155 or higher											
	All Maint items will be		<u> </u>									
			ed with new kitchen.									
	Checking for dented of		Libertonia de 1916 e e e e de	.1.22								
	Rusty shelving in wic											
	Opens canned beans	to be at 4	41 F from 70 within 4	hrs after opening - wi	I send pics							
	Will confirm with FDA											
	When cooking beans t											
33	Dishmachine not sanit			•	• • •							
	After washing and rins	sing will	be sanitizing with spr	ay bottle at 100 ppm -	tested to be 100ppr	n						
18/cos	Sanitizer too strong - o	diluted at	t insp / tested and wil	I be used at 100 ppm								
	Will use spray bottle o	r sink										
	Currently serving 3 me	eals per d	day for 200 inmates									
	Condensation in wif -	using tra	ys underneath to Pro	tect / food is in boxes	- new facility will ad	ldress						
	Discussed new plan for beans today!											
	Will send pic of beans temp and cooling and discarding current beans											
Digital and laser thermo on site and test strips for chlorine on site												
Received	by:		Print:		Title: Person In Charge/	Owner						
(signature)	See abou	/e										
Inspected (signature)	l by:	4 , 7	Print:									
	Keuy Kirkpa	urick	KS		Samples: Y N #	collected						