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

Retail Food Establishment Inspection Report

All reports opened at same time

City of Rockwall

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

Date: Time in: Time out: License/Per 05/17/2021 9:15 11:35 FS 93										Micro Risk Category Low Page 1 of 2								
Purpose of Inspection:							4-Investigation				n	5-CO/Construction 6-Other TOTAL/SCORE						
Establishment Name: Texas health hospital Rockwall Accent THR/ physici									Vame:	ame:					* Number of Repeat Violations: Vumber of Violations COS:			
			ddre.		ospitai Hockwaii Ai		st contro	<u> </u>	Hood Grease t			(Greas	<u> </u>				
Hoi	izon			~		See mpliance IN = in	cafe	ice		Na Na					No 🗹			
Ma	rk th	Com ne ap	pliar	riate	points in the OUT box for	each numbered it	em	Mark ¶	_						pplicable COS = corrected on site R = repeat violation W- Watch			
Priority Items (3 Points) violations Re Compliance Status												ediate oliane			tive Action not to exceed 3 days			
O U T	I N N C N O A O Time and Temperature for Food Safety						R	τ	O I U N	I N N C N O A O			Employee Health					
1	s (F = degrees Fahrenneit) 1. Proper cooling time and temperature											3	12. Manag ement, 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			
	~				See	temperature(41	17 43 17	,			V				eyes, nose, and mouth Hospital staff			
			/		3. Proper Hot Holding to	emperature(135°	°F)						<u> </u>		Preventing Contamination by Hands			
			/		4. Proper cooking time	and temperature					14. Hands cleaned and properly washed/ Gloves used p							
					5. Proper reheating proc Hours)	edure for hot ho	olding (1	65°F in 2			15. No bare hand contact with ready to eat foods or appro- alternate method properly followed (APPROVED Y							
					6. Time as a Public Hea	lth Control: proc	cedures	& records	_		No food contact							
			•		or time us at a usine trea						T				Highly Susceptible Populations 16. Pasteurized foods used; prohibited food not offered			
					Арј	proved Source							~		Pasteurized eggs used when required Precooked			
					7. Food and ice obtained good condition, safe, an													
					destruction		•								Chemicals			
	/				8. Food Received at pro	per temperature								,	17. Food additives; approved and properly stored; Washing Fruits & Vegetables			
				By company						-					18. Toxic substances properly identified, stored and used			
				Protection from Contamination 9. Food Separated & protected, prevented during food														
	~				preparation, storage, dis										Water/ Plumbing			
	~				10. Food contact surface Sanitized at Na			aned and			V				19. Water from approved source; Plumbing installed; proper backflow device			
		~			11. Proper disposition or reconditioned Retu	f returned, previ	ously se	rved or staff /			V				20. Approved Sewage/Wastewater Disposal System, proper disposal			
		D.T.	.	C	Prie	ority Founda	tion It	ems (2 Po	ints)						rrective Action within 10 days			
O U T	N	N O	N A	C O S	Demonstration	of Knowledge/	Person	nel	K	τ	O I U N Γ	O		os	Food Temperature Control/ Identification			
	~				21. Person in charge pre and perform duties/ Cer 4						V				27. Proper cooling method used; Equipment Adequate to Maintain Product Temperature			
	~				22. Food Handler/ no ur 10 plus	nauthorized person	ons/ pers	sonnel				/			28. Proper Date Marking and disposition			
Safe Water, Recordkeeping and Food Package Labeling						V				29. Thermometers provided, accurate, and calibrated; Chemical/ Thermal test strips Secondary present								
		23. Hot and Cold Water available; adequate pressure, safe								Permit Requirement, Prerequisite for Operation								
	İ				24. Required records av destruction); Packaged	ailable (shellstoo	ck tags;	parasite							30. Food Establishment Permit (Current/ insp sign posted)			
					Received cor	nmercial	•								Posted Usanila Equipment and Vanding			
					25. Compliance with Va	ariance, Specializ	zed Proc				T				Utensils, Equipment, and Vending 31. Adequate handwashing facilities: Accessible and properly			
	/				HACCP plan; Variance processing methods; ma						V				supplied, used			
					Cons	sumer Advisory	,				V				32. Food and Non-food Contact surfaces cleanable, properly designed, constructed, and used			
	/				26. Posting of Consume foods (Disclosure/Remi	nder/Buffet Plate							,	,	33. Warewashing Facilities; installed, maintained, used/ Service sink or curb cleaning facility provided			
					On commercial labe	ls			Actic	n AT-	t to	Eve		00 D-	ays or Next Inspection , Whichever Comes First			
O U	I N	N O	N A	C O	•	of Food Contam	•		R	(ot to O I U N	N	N	C	ys or Next Inspection , whichever Comes First Food Identification			
T				S							Γ	 		s	41.Original container labeling (Bulk Food)			
			34. No Evidence of Insect contamination, rodent/other animals 35. Personal Cleanliness/eating, drinking or tobacco use		H													
	•		36. Wiping Cloths; properly used and stored Cafe staff		H			•			Physical Facilities 42. Non-Food Contact surfaces clean							
					37, Environmental control	amination			H	\vdash	V	-			43. Adequate ventilation and lighting; designated areas used			
		37. Environmental contamination Watch inside units 38. Approved thawing method				H	\vdash	Ť				44. Garbage and Refuse properly disposed; facilities maintained						
	Proper Use of Utensils					\vdash	v				45. Physical facilities installed, maintained, and clean							
					39. Utensils, equipment	, & linens; prope	erly used			\vdash					46. Toilet Facilities; properly constructed, supplied, and clean			
	'				dried, & handled/ In us Watch shelving e	etc	•				~				Equipped			
	/				40. Single-service & sin and used	igle-use articles;	properly	y stored				~			47. Other Violations			

Retail Food Establishment Inspection Report

City of Rockwall

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

Form EH-06 (Revised 09-2015)

Establishr Texas	nent Name: S health ACCENT	Physical Add Horizon			y/State: ockwall	License/Permit # FS 9398	Page <u>2</u> of <u>2</u>						
	2 2	131.201.		RE OBSERVATI									
Item/Loc	ation	Temp F	tem/Location		Temp F Item	Location	Temp						
Tcs for	ods cooler	32/34											
Non ⁻	Tcs - 32/34/ 28 /33												
14011	103 0L/04/ L0/00												
Micro	market self service												
IVIICIO	THAIRET SEIT SEIVICE		ERVATIONS AND	CORRECTIVI	FACTIONS								
Item	AN INSPECTION OF YOUR ES					TO THE CONDITIONS OBSI	ERVED AND						
Number	NOTED BELOW:		_										
	All coolers lockable fo		tages										
	Packages reflect ingredients												
	Camera at pos Phone number for accent foods posted - contact												
					ne								
	All foods commercially packaged / Ingredients show allergens												
W	Dates for Tcs are within range												
	Watch cleaning inside coolers etc												
	Secondary thermo in Tcs food cooler Permit posted												
	remiii posted												
Received	by:		Print:			Title: Person In Char	ge/ Owner						
(signature)	See aboy Kelly kirkpa	/e											