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|---|----------------------------------|---|---|--|---|--|---------------|
| GEORGIA DEPARTMENT OF PUBLIC HEALTH Food Service Establishment Inspection Report | | | | | | CURRENT SCORE | CURRENT GRADE |
| | | | | | | 83 | B |
| Establishment Name: <u>Penfield Christian Home</u> Address: <u>702 E Villanow ST</u> City: <u>LaFayette</u> Time In: <u>03</u> : <u>55</u> PM Time Out: <u>04</u> : <u>40</u> PM Inspection Date: <u>08/27/2015</u> CFSM: <u>Allen Stone 10-7-14</u> | | | | | | SCORING AND GRADING: A=90-100 B=80-89 C=70-79 U=69 | |
| Purpose of Inspection: Construction/Preoperational <input type="radio"/> Initial <input type="radio"/> Routine <input checked="" type="radio"/> Follow-up <input type="radio"/> Temporary <input type="radio"/> | | | | | | | |
| Risk Type: 1 <input type="radio"/> 2 <input checked="" type="radio"/> 3 <input type="radio"/> Permit#: <u>765</u> | | | | | | | |
| Risk Factors are food preparation practices and employee behaviors most commonly reported to the Centers for Disease Control and Prevention as contributing factors in foodborne illness outbreaks. | | | Good Retail Practices are preventive measures to control the introduction of pathogens, chemicals, and physical objects into foods. | | | | |
| FOODBORNE ILLNESS RISK FACTORS AND PUBLIC HEALTH INTERVENTIONS (Mark designated compliance status (IN, OUT, NA, or NO) for each numbered item. For items marked OUT, mark COS or R for each item as applicable.) IN=in compliance OUT=not in compliance NO=not observed NA=not applicable COS=corrected on-site during inspection R=repeat violation of the same code provision=2 points | | | | | | | |
| Compliance Status | | | | COS | | R | |
| 1 | IN | OUT | NA | NO | Supervision 4 points | | |
| | <input type="radio"/> | <input checked="" type="radio"/> | | | 1-2. Person in charge present, demonstrates knowledge, and performs duties 0 0 | | |
| 2 | IN | OUT | NA | NO | Employee Health, Good Hygienic Practices, Preventing Contamination by Hands 9 points | | |
| | <input checked="" type="radio"/> | <input type="radio"/> | | | 2-1A. Proper use of restriction & exclusion 0 0 | | |
| | <input checked="" type="radio"/> | <input type="radio"/> | | | 2-1B. Hands clean and properly washed 0 0 | | |
| | <input checked="" type="radio"/> | <input type="radio"/> | | | 2-1C. No bare hand contact with ready-to-eat foods or approved alternate method properly followed 0 0 | | |
| | <input checked="" type="radio"/> | <input type="radio"/> | | | 2-2A. Management awareness; policy present; reporting 0 0 | | |
| | <input checked="" type="radio"/> | <input type="radio"/> | | | 2-2B. Proper eating, tasting, drinking, or tobacco use 0 0 | | |
| | <input checked="" type="radio"/> | <input type="radio"/> | | | 2-2C. No discharge from eyes, nose, and mouth 0 0 | | |
| | <input checked="" type="radio"/> | <input type="radio"/> | | | 2-2D. Adequate handwashing facilities supplied & accessible 0 0 | | |
| 3 | IN | OUT | NA | NO | Approved Source 9 points | | |
| | <input checked="" type="radio"/> | <input type="radio"/> | | | 3-1A. Food obtained from approved source, parasite destruction 0 0 | | |
| | <input checked="" type="radio"/> | <input type="radio"/> | | | 3-1B. Food received at proper temperature 0 0 | | |
| | <input checked="" type="radio"/> | <input type="radio"/> | | | 3-1C. Food in good condition, safe, and unadulterated 0 0 | | |
| 4 | IN | OUT | NA | NO | Protection from Contamination 9 points | | |
| | <input checked="" type="radio"/> | <input type="radio"/> | | | 4-1A. Food separated and protected 0 0 | | |
| | <input checked="" type="radio"/> | <input type="radio"/> | | | 4-1B. Proper disposition of contaminated food; returned food or unused food not re-served 0 0 | | |
| | <input checked="" type="radio"/> | <input type="radio"/> | | | 4-2A. Food stored covered 0 0 | | |
| | <input checked="" type="radio"/> | <input type="radio"/> | | | 4-2B. Food-contact surfaces; cleaned & sanitized 0 0 | | |
| 5 | IN | OUT | NA | NO | Cooking and Reheating of Potentially Hazardous Foods, Consumer Advisory 9 points | | |
| | <input type="radio"/> | <input type="radio"/> | | <input checked="" type="radio"/> | 5-1A. Proper cooking time and temperatures 0 0 | | |
| | <input type="radio"/> | <input type="radio"/> | | <input checked="" type="radio"/> | 5-1B. Proper reheating procedures for hot holding 0 0 | | |
| | <input type="radio"/> | <input type="radio"/> | | <input checked="" type="radio"/> | 5-2. Consumer advisory provided for raw and undercooked foods 0 0 | | |
| 6 | IN | OUT | NA | NO | Holding of Potentially Hazardous Foods, Date Marking Potentially Hazardous Foods 9 points | | |
| | <input checked="" type="radio"/> | <input type="radio"/> | | | 6-1A. Proper cold holding temperature 0 0 | | |
| | <input type="radio"/> | <input type="radio"/> | | <input checked="" type="radio"/> | 6-1B. Proper hot holding temperature 0 0 | | |
| | <input type="radio"/> | <input type="radio"/> | | <input checked="" type="radio"/> | 6-1C. Proper cooling time and temperature 0 0 | | |
| | <input type="radio"/> | <input type="radio"/> | | <input checked="" type="radio"/> | 6-1D. Time as a public health control; procedures and records 0 0 | | |
| | <input type="radio"/> | <input checked="" type="radio"/> | | | 6-2. Proper date marking and disposition 0 0 | | |
| 7 | IN | OUT | NA | NO | Highly Susceptible Populations 9 points | | |
| | <input type="radio"/> | <input type="radio"/> | | <input checked="" type="radio"/> | 7-1. Pasteurized foods used; Prohibited foods not offered 0 0 | | |
| 8 | IN | OUT | NA | NO | Chemicals 4 points | | |
| | <input type="radio"/> | <input type="radio"/> | | <input checked="" type="radio"/> | 8-2A. Food additives; approved and properly used 0 0 | | |
| | <input checked="" type="radio"/> | <input type="radio"/> | | | 8-2B. Toxic substances properly identified, stored, used 0 0 | | |
| 9 | IN | OUT | NA | NO | Conformance with Approved Procedures 4 points | | |
| | <input type="radio"/> | <input type="radio"/> | | <input checked="" type="radio"/> | 9-2. Compliance with variance, specialized process and HACCP plan 0 0 | | |
| GOOD RETAIL PRACTICES (Mark the numbered item OUT, if not in compliance. For items marked OUT, mark COS or R for each item as applicable. R = Repeat Violation of the same code provision = 1 point) | | | | | | | |
| Compliance Status | | | | COS | | R | |
| 10 | OUT | Safe Food and Water, Food Identification 3 points | | | | | |
| | <input type="radio"/> | 10A. Pasteurized eggs used where required 0 0 | | | | | |
| | <input type="radio"/> | 10B. Water and ice from approved source 0 0 | | | | | |
| | <input type="radio"/> | 10C. Variance obtained for specialized processing methods 0 0 | | | | | |
| | <input type="radio"/> | 10D. Food properly labeled; original container; required records available; shellstock tags 0 0 | | | | | |
| 11 | OUT | Food Temperature Control 3 points | | | | | |
| | <input type="radio"/> | 11A. Proper cooling methods used; adequate equipment for temperature control 0 0 | | | | | |
| | <input type="radio"/> | 11B. Plant food properly cooked for hot holding 0 0 | | | | | |
| | <input type="radio"/> | 11C. Approved thawing methods used 0 0 | | | | | |
| | <input type="radio"/> | 11D. Thermometers provided and accurate 0 0 | | | | | |
| 12 | OUT | Prevention of Food Contamination 3 points | | | | | |
| | <input checked="" type="radio"/> | 12A. Contamination prevented during food preparation, storage display 0 0 | | | | | |
| | <input type="radio"/> | 12B. Personal cleanliness 0 0 | | | | | |
| | <input type="radio"/> | 12C. Wiping cloths; properly used and stored 0 0 | | | | | |
| | <input type="radio"/> | 12D. Washing fruits and vegetables 0 0 | | | | | |
| 13 | OUT | Postings and Compliance with Clean Air Act 1 point | | | | | |
| | <input type="radio"/> | 13A. Posted: Permit/Inspection/Choking Poster/Handwashing 0 0 | | | | | |
| | <input type="radio"/> | 13B. Compliance with Georgia Smoke Free Air Act 0 0 | | | | | |
| Compliance Status | | | | COS | | R | |
| 14 | OUT | Proper Use of Utensils 1 point | | | | | |
| | <input type="radio"/> | 14A. In-use utensils; properly stored 0 0 | | | | | |
| | <input type="radio"/> | 14B. Utensils, equipment and linens; properly stored, dried, handled 0 0 | | | | | |
| | <input type="radio"/> | 14C. Single-use/single-service articles; properly stored, used 0 0 | | | | | |
| | <input type="radio"/> | 14D. Gloves used properly 0 0 | | | | | |
| 15 | OUT | Utensils, Equipment and Vending 1 point | | | | | |
| | <input type="radio"/> | 15A. Food and nonfood-contact surfaces cleanable, properly designed, constructed, and used 0 0 | | | | | |
| | <input type="radio"/> | 15B. Warewashing facilities; installed, maintained, used; test strips 0 0 | | | | | |
| | <input type="radio"/> | 15C. Nonfood-contact surfaces clean 0 0 | | | | | |
| 16 | OUT | Water, Plumbing and Waste 2 points | | | | | |
| | <input type="radio"/> | 16A. Hot and cold water available; adequate pressure 0 0 | | | | | |
| | <input type="radio"/> | 16B. Plumbing installed; proper backflow devices 0 0 | | | | | |
| | <input type="radio"/> | 16C. Sewage and waste water properly disposed 0 0 | | | | | |
| 17 | OUT | Physical Facilities 1 point | | | | | |
| | <input type="radio"/> | 17A. Toilet facilities; properly constructed, supplied, cleaned 0 0 | | | | | |
| | <input type="radio"/> | 17B. Garbage/refuse properly disposed; facilities maintained 0 0 | | | | | |
| | <input type="radio"/> | 17C. Physical facilities installed, maintained, and clean 0 0 | | | | | |
| | <input type="radio"/> | 17D. Adequate ventilation and lighting; designated areas used 0 0 | | | | | |
| 18 | OUT | Pest and Animal Control 3 points | | | | | |
| | <input type="radio"/> | 18. Insects, rodents, and animals not present 0 0 | | | | | |
| Person in Charge (Signature) _____ (Print) <u>Allen Stone</u> Date: _____ | | | | Inspector (Signature) <u>Ashlee Grimm</u> Follow-up: YES <input type="radio"/> NO <input checked="" type="radio"/> Follow-up Date: _____ | | | |

Food Establishment Inspection Report Addendum

Violations cited in this report must be corrected within the time frames specified below, or as stated in the Georgia Department of Human Resources Rules and Regulations Food Service Chapter 290-5-14, Rule .10 subsections (2)(i) and (j).

| | | |
|---|-----------------------------------|---------------------------|
| Establishment Penfield Christian Home | Permit # 765 | Date 08/27/2015 |
| Address 702 E VILLANOW ST | City/State LAFAYETTE GA | Zipcode 30728 |

TEMPERATURE OBSERVATIONS

| Item/Location | Temp | Item/Location | Temp | Item/Location | Temp |
|--|----------|--|----------|-------------------------------------|----------|
| Other PHF Ravioli / Refrigerator, | 41.0 ° F | Other PHF Vegetable Soup / Refrigerator, | 39.0 ° F | Other PHF Cole Slaw / Refrigerator, | 39.0 ° F |
| Poultry Shredded Chicken / Refrigerator, | 40.0 ° F | | | | |

OBSERVATIONS AND CORRECTIVE ACTIONS

- | Item Number | Observations and Corrective Actions |
|-------------|--|
| 1-2 | Violation of Code: [.03(3)(a)-(d)] ServSafe is expired. /CA: Pic plans to register for course on October 17, 2015 and will send us proof of registration next week. A 30 day letter will be sent to establishment. New Violation. |
| 2-2D | Violation of Code: [.07(3)(a)] Observed no soap at hand washing sink. /CA: Employee replaced soap. Corrected On-Site. New Violation. |
| 2-2D | Violation of Code: [.07(3)(b)] Observed no paper towels at hand washing sink. /CA: Employee replaced paper towels. Corrected On-Site. New Violation. |
| 6-2 | Violation of Code: [.04(6)(g)] Observed several PHF items (ravioli, soups, cole slaw, shredded chicken, etc) in the refrigerator not date marked. /CA: Employee discarded items that exceeded 7 days and date marked recently prepared items. Corrected On-Site. Repeat Violation. |
| 12A | Violation of Code: [.04(4)(q)] Observed several boxes of food and can food on floor. /CA: Pic will place items on shelves. New Violation. |

Remarks No food being prepared during inspection. Pic will email proof of registration for ServSafe next week. A 30 day letter for expired ServSafe will be mailed to Allen tomorrow.

Person in Charge (Signature)

Date:

Inspector (Signature) Ashlee Grimm

Date: 08/27/2015