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|---|---|----------------------------------|----------------------------------|---|-----------------------|--|----------------------------------|-------------------------|
| DEPARTMENT OF COMMUNITY HEALTH, DIVISION OF PUBLIC HEALTH Food Service Establishment Inspection Report | | | | | | CURRENT SCORE | CURRENT GRADE | |
| Establishment Name: <u>VERANDA ASSISTED LIVING</u> Address: <u>6830 RIVER RD</u> | | | | | | 90 | A | |
| City: <u>COLUMBUS</u> Time In: <u>03</u> : <u>30</u> PM Time Out: <u>04</u> : <u>40</u> PM Inspection Date: <u>08/09/2011</u> CFSM: Santos Perez | | | | | | | | |
| Purpose of Inspection: Routine <input checked="" type="radio"/> Followup <input type="radio"/> Complaint <input type="radio"/> Preliminary <input type="radio"/> Other <input type="radio"/> | | | | | | | | |
| Risk Type: 1 <input type="radio"/> 2 <input checked="" type="radio"/> 3 <input type="radio"/> Permit#: 106-532 | | | | | | Last Score 87 | Grade B | Date 02/08/11 |
| <small>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. Public Health Interventions are control measures to prevent illness or injury.</small> | | | | | | Prior Score 80 | Grade B | Date 08/18/10 |
| FOODBORNE ILLNESS RISK FACTORS AND PUBLIC HEALTH INTERVENTIONS | | | | | | <small>SCORING AND GRADING: A=90-100 B=80-89 C=70-79 U=69</small> | | |
| <small>(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. Deduct points for category or subcategory.) IN=in compliance OUT=not in compliance NO=not observed NA=not applicable COS=corrected on-site during inspection R=repeat violation (violation of the same code provision)= 2 points per subcategory</small> | | | | | | | | |
| Compliance Status | | | | COS | | R | | |
| 1 IN OUT NA NO | | | | Supervision - Subcategory 2 | | 4 points | | |
| <input checked="" type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | 1-2. Person in charge present, demonstrates knowledge, and performs duties | | <input type="radio"/> | <input type="radio"/> | |
| 2 IN OUT NA NO | | | | Employee Health, Good Hygienic Practices, Preventing Contamination by Hands - Subcategory 1 | | 9 points | | |
| <input checked="" type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | 2-1A. Proper use of restriction & exclusion | | <input type="radio"/> | <input type="radio"/> | |
| <input checked="" type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | 2-1B. Hands clean and properly washed | | <input type="radio"/> | <input type="radio"/> | |
| <input checked="" type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | 2-1C. No bare hand contact with ready-to-eat foods or approved alternate method properly followed | | <input type="radio"/> | <input type="radio"/> | |
| Employee Health, Good Hygienic Practices-Subcategory 2 | | | | 4 points | | | | |
| <input checked="" type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | 2-2A. Management awareness; policy present; reporting | | <input type="radio"/> | <input type="radio"/> | |
| <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> | <input type="radio"/> | 2-2B. Proper eating, tasting, drinking, or tobacco use | | <input type="radio"/> | <input type="radio"/> | |
| <input checked="" type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | 2-2C. No discharge from eyes, nose, and mouth | | <input type="radio"/> | <input type="radio"/> | |
| <input checked="" type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | 2-2D. Adequate handwashing facilities supplied & accessible | | <input type="radio"/> | <input type="radio"/> | |
| 3 IN OUT NA NO | | | | Approved Source - Subcategory 1 | | 9 points | | |
| <input checked="" type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | 3-1A. Food obtained from approval source, parasite destruction | | <input type="radio"/> | <input type="radio"/> | |
| <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> | <input type="radio"/> | 3-1B. Food received at proper temperature | | <input type="radio"/> | <input type="radio"/> | |
| <input checked="" type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | 3-1C. Food in good condition, safe, and unadulterated | | <input type="radio"/> | <input type="radio"/> | |
| 4 IN OUT NA NO | | | | Protection from Contamination - Subcategory 1 | | 9 points | | |
| <input checked="" type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | 4-1A. Food separated and protected | | <input type="radio"/> | <input type="radio"/> | |
| <input checked="" type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | 4-1B. Proper disposition of contaminated food; returned food or unused food not re-served | | <input type="radio"/> | <input type="radio"/> | |
| Protection from Contamination-Subcategory 2 | | | | 4 points | | | | |
| <input checked="" type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | 4-2A. Food stored covered | | <input type="radio"/> | <input type="radio"/> | |
| <input checked="" type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | 4-2B. Food-contact surfaces; cleaned & sanitized | | <input type="radio"/> | <input type="radio"/> | |
| 5 IN OUT NA NO | | | | Cooking and Reheating of Potentially Hazardous Foods, Consumer Advisory - Subcategory 1 | | 9 points | | |
| <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> | 5-1A. Proper cooking time and temperatures | | <input type="radio"/> | <input type="radio"/> | |
| <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> | 5-1B. Proper reheating procedures for hot holding | | <input type="radio"/> | <input type="radio"/> | |
| Consumer Advisory-Subcategory 2 | | | | 4 points | | | | |
| <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> | <input type="radio"/> | 5-2. Consumer advisory provided for raw and undercooked foods | | <input type="radio"/> | <input type="radio"/> | |
| 6 IN OUT NA NO | | | | Holding of Potentially Hazardous Foods, Date Marking Potentially Hazardous Foods - Subcategory 1 | | 9 points | | |
| <input checked="" type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | 6-1A. Proper cold holding temperature | | <input type="radio"/> | <input type="radio"/> | |
| <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> | 6-1B. Proper hot holding temperature | | <input type="radio"/> | <input type="radio"/> | |
| <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> | 6-1C. Proper cooling time and temperature | | <input type="radio"/> | <input type="radio"/> | |
| <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> | <input type="radio"/> | 6-1D. Time as a public health control; procedures and records | | <input type="radio"/> | <input type="radio"/> | |
| Date Marking-Subcategory 2 | | | | 4 points | | | | |
| <input type="radio"/> | <input checked="" type="radio"/> | <input type="radio"/> | <input type="radio"/> | 6-2. Proper date marking and disposition | | <input type="radio"/> | <input checked="" type="radio"/> | |
| 7 IN OUT NA NO | | | | Highly Susceptible Populations - Subcategory 1 | | 9 points | | |
| <input checked="" type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | 7-1. Pasteurized foods used; Prohibited foods not offered | | <input type="radio"/> | <input type="radio"/> | |
| 8 IN OUT NA NO | | | | Chemicals - Subcategory 2 | | 4 points | | |
| <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> | <input type="radio"/> | 8-2A. Food additives: approved and properly used | | <input type="radio"/> | <input type="radio"/> | |
| <input checked="" type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | 8-2B. Toxic substances properly identified, stored, used | | <input type="radio"/> | <input type="radio"/> | |
| 9 IN OUT NA NO | | | | Conformance with Approved Procedures - Subcategory 2 | | 4 points | | |
| <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> | <input type="radio"/> | 9-2. Compliance with variance, specialized process and HACCP plan | | <input type="radio"/> | <input type="radio"/> | |
| GOOD RETAIL PRACTICES | | | | | | | | |
| <small>(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 case provision) = 1 point per category)</small> | | | | | | | | |
| Compliance Status | | | | COS | | R | | |
| 10 OUT | | | | Safe Food and Water, Food Identification | | 3 points | | |
| <input type="radio"/> | 10A. Pasteurized eggs used where required | | | <input type="radio"/> | <input type="radio"/> | | | |
| <input type="radio"/> | 10B. Water and ice from approved source | | | <input type="radio"/> | <input type="radio"/> | | | |
| <input type="radio"/> | 10C. Variance obtained for specialized processing methods | | | <input type="radio"/> | <input type="radio"/> | | | |
| <input type="radio"/> | 10D. Food properly labeled; original container; required records available; shellstock tags | | | <input type="radio"/> | <input type="radio"/> | | | |
| 11 OUT | | | | Food Temperature Control | | 3 points | | |
| <input type="radio"/> | 11A. Proper cooling methods used; adequate equipment for temperature control | | | <input type="radio"/> | <input type="radio"/> | | | |
| <input type="radio"/> | 11B. Plant food properly cooked for hot holding | | | <input type="radio"/> | <input type="radio"/> | | | |
| <input type="radio"/> | 11C. Approved thawing methods used | | | <input type="radio"/> | <input type="radio"/> | | | |
| <input type="radio"/> | 11D. Thermometers provided and accurate | | | <input type="radio"/> | <input type="radio"/> | | | |
| 12 OUT | | | | Prevention of Food Contamination | | 3 points | | |
| <input type="radio"/> | 12A. Contamination prevented during food preparation, storage display | | | <input type="radio"/> | <input type="radio"/> | | | |
| <input type="radio"/> | 12B. Personal cleanliness | | | <input type="radio"/> | <input type="radio"/> | | | |
| <input type="radio"/> | 12C. Wiping cloths; properly used and stored | | | <input type="radio"/> | <input type="radio"/> | | | |
| <input type="radio"/> | 12D. Washing fruits and vegetables | | | <input type="radio"/> | <input type="radio"/> | | | |
| 13 OUT | | | | Postings and Compliance with Clean Air Act | | 1 point | | |
| <input type="radio"/> | 13A. Posted: Permit/Inspection/Choking Poster/Handwashing | | | <input type="radio"/> | <input type="radio"/> | | | |
| <input type="radio"/> | 13B. Compliance with Georgia Smoke Free Air Act | | | <input type="radio"/> | <input type="radio"/> | | | |
| 14 OUT | | | | Proper Use of Utensils | | 1 point | | |
| <input type="radio"/> | 14A. In-use utensils; properly stored | | | <input type="radio"/> | <input type="radio"/> | | | |
| <input type="radio"/> | 14B. Utensils, equipment and linens; properly stored, dried, handled | | | <input type="radio"/> | <input type="radio"/> | | | |
| <input type="radio"/> | 14C. Single-use/single-service articles; properly stored, used | | | <input type="radio"/> | <input type="radio"/> | | | |
| <input type="radio"/> | 14D. Gloves used properly | | | <input type="radio"/> | <input type="radio"/> | | | |
| 15 OUT | | | | Utensils, Equipment and Vending | | 1 point | | |
| <input type="radio"/> | 15A. Food and nonfood-contact surfaces cleanable, properly designed, constructed, and used | | | <input type="radio"/> | <input type="radio"/> | | | |
| <input checked="" type="radio"/> | 15B. Warewashing facilities; installed, maintained, used; test strips | | | <input type="radio"/> | <input type="radio"/> | | | |
| <input type="radio"/> | 15C. Nonfood-contact surfaces clean | | | <input type="radio"/> | <input type="radio"/> | | | |
| 16 OUT | | | | Water, Plumbing and Waste | | 2 points | | |
| <input type="radio"/> | 16A. Hot and cold water available; adequate pressure | | | <input type="radio"/> | <input type="radio"/> | | | |
| <input type="radio"/> | 16B. Plumbing installed; proper backflow devices | | | <input type="radio"/> | <input type="radio"/> | | | |
| <input type="radio"/> | 16C. Sewage and waste water properly disposed | | | <input type="radio"/> | <input type="radio"/> | | | |
| 17 OUT | | | | Physical Facilities | | 1 point | | |
| <input type="radio"/> | 17A. Toilet facilities; properly constructed, supplied, cleaned | | | <input type="radio"/> | <input type="radio"/> | | | |
| <input type="radio"/> | 17B. Garbage/refuse properly disposed; facilities maintained | | | <input type="radio"/> | <input type="radio"/> | | | |
| <input type="radio"/> | 17C. Physical facilities installed, maintained, and clean | | | <input type="radio"/> | <input type="radio"/> | | | |
| <input type="radio"/> | 17D. Adequate ventilation and lighting; designated areas used | | | <input type="radio"/> | <input type="radio"/> | | | |
| 18 OUT | | | | Pest and Animal Control | | 3 points | | |
| <input checked="" type="radio"/> | 18. Insects, rodents, and animals not present | | | <input type="radio"/> | <input type="radio"/> | | | |
| Person in Charge (Signature) _____ (Print) Santos Perez | | | | | | Date: 01/01/1900 | | |
| Inspector (Signature) Wanda Boutwell | | | | | | 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
VERANDA ASSISTED LIVING

Permit #
106-532

Date
08/09/2011

Address
6830 RIVER RD

City/State
COLUMBUS GA

Zipcode
31804

TEMPERATURE OBSERVATIONS

| Item/Location | Temp | Item/Location | Temp | Item/Location | Temp |
|----------------------------|----------|-----------------------------|----------|---------------|------|
| pepperoni / Walk-In Cooler | 42.0 ° F | roast beef / Walk-In Cooler | 40.0 ° F | | |

OBSERVATIONS AND CORRECTIVE ACTIONS

- | | |
|-------------|--|
| Item Number | 6-2 food stored in walk-in cooler w/out "use-by" or "discard-by" dates. PH manufactured items with no opening date Repeat Violation. 15B gauge on dishwashing machine possibly mal-functioning. ran 7 times to reach 180 degrees New Violation. 18 roaches present dishwashing area New Violation. |
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Remarks

Person in Charge (Signature)

Date:

Inspector (Signature) Wanda Boutwell

Date: 08/09/2011