

CITY OF HELOTES

HEALTH INSPECTION SUMMARY APRIL 2021

RECEIVED
MAY 07 2021
CITY OF HELOTES

PART ONE--FOOD SAFETY REPORT



This report provides current information on the food safety program in Helotes. The Texas Food Code is based on the principles of hazard analysis and critical control points (HACCP). In the implementation of HACCP the focus includes food manager education and professional consultation toward improvement in addition to periodic inspections. To ensure uniformity in the application of the Texas Food Establishment Rules the inspection report form is utilized. Inspections are random to ensure handling of peak times on a variety of days. The inspection report form summarizes inspectional findings with a weighted point value for each classification of inspection items. The report form which is reviewed with and signed by the food establishment management and is posted in each retail establishment. Critical items inspected are temperatures, food control surfaces, cross-contamination, etc.; other items inspected are less critical. The compliance score is the total number of demerits. (A score of "0" indicates full compliance with critical and non-critical items.)

Copies of these reports are filed with the City of Helotes as well as posted in the individual establishments.

The compliance score is the total number of demerits. (A score of "0" indicates full compliance with critical and non-critical items.)

For ease a rating system would be

EXCELLENT	0-10 demerits
GOOD	11-20 demerits
ACCEPTABLE	21-29 demerits
POOR	30 or more demerits

<u>Name of Establishment</u>	<u>Compliance Score*</u>	<u>Rating</u>
Helotes Country Store	6	EXCELLENT
Burger King	3	EXCELLENT
Taco Bell	0	EXCELLENT
Jugo	6	EXCELLENT
Starbucks	0	EXCELLENT
Sonic	5	EXCELLENT

PART TWO--OTHER ACTIVITIES/SERVICES REPORT PERFORMED INSPECTIONS AT THE FOLLOWING EVENTS:

➤ Non-City Market Days 4/3/2021

**This report submitted by:
Monty McGuffin, R. S.
City Health Inspector**

CITY OF HELOTES
 12951 Bandera Road, Helotes, Texas 78023 (210) 695-8877
 Mailing Address: P.O. Box 507, Helotes, TX 78023

MAY 07 2021

Retail Food Establishment Inspection Report

CITY OF HELOTES

Establishment: Helotes Country Store License # _____ RC: 2 Date: 4/23/2021
 Purpose of Visit: Compliance Inspection Consultation Complaint Illness Investigation Other: _____

<p>{A} Critical Food Safety Controls (5 pts) (Critical control violations must be corrected on the spot)</p> <ol style="list-style-type: none"> 1. Cold holding temperatures / time ✓ 2. Hot holding temperatures / time 3. Cooking temperatures / time 4. Proper cooling of foods / time 5. Rapid reheating of foods (temperature and time) 6. Food control surfaces clean and sanitized { } cutting boards { } meat slicer { } food grinder 7. Potential for cross-contamination to occur 8. RTE foods / no direct hand contact 9. Foods from approved sources / labeling ✓ 10. Foods protected from contamination 11. Other: _____ <hr/> <p>Critical Temperature Verification:</p> <table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th style="width:80%;">Food Item and Process</th> <th style="width:20%;">Temp (F°)</th> </tr> </thead> <tbody> <tr> <td><u>Walk-in 45°</u></td> <td></td> </tr> <tr> <td> </td> <td> </td> </tr> <tr> <td> </td> <td> </td> </tr> </tbody> </table> <p>{B} Facilities, Equipment and Food Storage (3 pts)</p> <ol style="list-style-type: none"> 12. Hand washing stations supplied and clean 13. Dishwashing / sanitizing (____ ppm/ ____ Temp.) 14. Food storage area meets code 15. Storage and use of toxic items 16. Evidence of insects or rodents / infestation 17. Sewage disposal / Grease trap 18. Thermometers provided / used 19. Plumbing / no cross-connections 20. Water supply / hot water 21. Sewage disposal meets code 22. Other _____ 	Food Item and Process	Temp (F°)	<u>Walk-in 45°</u>						<p>{C} Management and Personnel (4 pts)</p> <ol style="list-style-type: none"> 23. Manager on duty currently certified? 24. Manager demonstrates proper use of thermometer 25. Personnel with infections restricted / excluded 26. Proper hand washing demonstrated 27. Good hygienic practices observed 28. Written HACCP Plans / SOPs as needed <p>{D} Non-Critical (3 pts)</p> <ol style="list-style-type: none"> 29. Food equipment construction / repair ✓ 30. Facility construction (floors / walls) / repair ✓ 31. Housekeeping contributes to infestation ✓ 32. Non-food contact surfaces clean ✓ 33. Garbage / solid waste storage ✓ 34. Consumer advisories posted ✓ 35. Inspection report displayed for public ✓ 36. Other _____ <p>{E} Corrections / Improvements Made / Comments:</p> <hr/> <p><u>#12 Provide for hand sink</u> <u>To be supplied + accessible</u></p> <hr/> <p><u>#14 Provide for Dishwasher</u> <u>To be properly stored</u></p> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/>
Food Item and Process	Temp (F°)								
<u>Walk-in 45°</u>									

As the person in charge of this facility, I understand I am responsible for food safety practices described in sections 229.163 (b) and 229.163 (c) of the Texas State Food Code. I understand that failure of employees to conduct a 20 second hand wash prior to starting work, after handling raw products or visiting the restroom and that failure to manage required temperature and time controls have a high risk of causing food-borne illness. I agree to implement corrective actions described in Part E to reduce the risk of food-borne illness.

Non-Critical Food Safety Rating ✓				
Area	Superior	Above Average	Average	Minimal
Training				
Restrooms				
Housekeeping				
Equipment				
Construction				
Overall Rating				

HACCP Compliance Score = 6
 (Does not apply to consultations or follow-up visits)

 Person In Charge / Manager / Owner

 Evaluation by Registered Sanitarian

CITY OF HELOTES

12951 Bandera Road, Helotes, Texas 78023 (210) 695-8877

Mailing Address: P.O. Box 507, Helotes, TX 78023

Retail Food Establishment Inspection Report

Establishment: Taco Bell License # RC: 3 Date: 4/25/2011

Purpose of Visit: [X] Compliance Inspection [] Consultation [] Complaint [] Illness Investigation [] Other:

- {A} Critical Food Safety Controls (5 pts)
(Critical control violations must be corrected on the spot)
1. Cold holding temperatures / time
2. Hot holding temperatures / time
3. Cooking temperatures / time
4. Proper cooling of foods / time
5. Rapid reheating of foods (temperature and time)
6. Food control surfaces clean and sanitized
7. Potential for cross-contamination to occur
8. RTE foods / no direct hand contact
9. Foods from approved sources / labeling
10. Foods protected from contamination
11. Other:

Critical Temperature Verification:
Table with 2 columns: Food Item and Process, Temp (F°)
Rows: Walk-in 38, Walk-in, Warmers 160/160, Fry Cook 10/140, Freezer 0, Beans 150

- {B} Facilities, Equipment and Food Storage (3 pts)
12. Hand washing stations supplied and clean
13. Dishwashing / sanitizing (300 ppm / Temp.)
14. Food storage area meets code
15. Storage and use of toxic items
16. Evidence of insects or rodents / infestation
17. Sewage disposal / Grease trap
18. Thermometers provided / used
19. Plumbing / no cross-connections
20. Water supply / hot water
21. Sewage disposal meets code
22. Other

- {C} Management and Personnel (4 pts)
23. Manager on duty currently certified?
24. Manager demonstrates proper use of thermometer
25. Personnel with infections restricted / excluded
26. Proper hand washing demonstrated
27. Good hygienic practices observed
28. Written HACCP Plans / SOPs as needed

- {D} Non-Critical (3 pts)
29. Food equipment construction / repair
30. Facility construction (floors / walls) / repair
31. Housekeeping contributes to infestation
32. Non-food contact surfaces clean
33. Garbage / solid waste storage
34. Consumer advisories posted
35. Inspection report displayed for public
36. Other

{E} Corrections / Improvements Made / Comments:

Looks Great!

As the person in charge of this facility, I understand I am responsible for food safety practices described in sections 229.163 (b) and 229.163 (c) of the Texas State Food Code. I understand that failure of employees to conduct a 20 second hand wash prior to starting work, after handling raw products or visiting the restroom and that failure to manage required temperature and time controls have a high risk of causing food-borne illness. I agree to implement corrective actions described in Part E to reduce the risk of food-borne illness.

Non-Critical Food Safety Rating
Table with 5 columns: Area, Superior, Above Average, Average, Minimal
Rows: Training, Restrooms, Housekeeping, Equipment, Construction, Overall Rating

HACCP Compliance Score = 0
(Does not apply to consultations or follow-up visits)
Person In Charge / Manager / Owner
Evaluation by Registered Sanitarian

CITY OF HELOTES

12951 Bandera Road, Helotes, Texas 78023 (210) 695-8877

Mailing Address: P.O. Box 507, Helotes, TX 78023

Retail Food Establishment Inspection Report

Establishment: Jugo License # _____ RC: 3 Date: 4/25/2021
 Purpose of Visit: Compliance Inspection Consultation Complaint Illness Investigation Other: _____

{A} Critical Food Safety Controls (5 pts)
 (Critical control violations must be corrected on the spot)

1. Cold holding temperatures / time ✓
2. Hot holding temperatures / time
3. Cooking temperatures / time
4. Proper cooling of foods / time
5. Rapid reheating of foods (temperature and time)
6. Food control surfaces clean and sanitized
 { } cutting boards { } meat slicer { } food grinder
7. Potential for cross-contamination to occur
8. RTE foods / no direct hand contact
9. Foods from approved sources / labeling
10. Foods protected from contamination
11. Other: _____

Critical Temperature Verification:

Food Item and Process	Temp (F°)
Fridg- 40° Freezer 0°	
Chest Freezer 20° Dry Cooler 40°	

{B} Facilities, Equipment and Food Storage (3 pts)

12. Hand washing stations supplied and clean
13. Dishwashing / sanitizing (250 ppm / _____ Temp.)
14. Food storage area meets code
15. Storage and use of toxic items
16. Evidence of insects or rodents / infestation
17. Sewage disposal / Grease trap
18. Thermometers provided / used
19. Plumbing / no cross-connections
20. Water supply / hot water
21. Sewage disposal meets code
22. Other _____

{C} Management and Personnel (4 pts)

23. Manager on duty currently certified?
24. Manager demonstrates proper use of thermometer
25. Personnel with infections restricted / excluded
26. Proper hand washing demonstrated
27. Good hygienic practices observed
28. Written HACCP Plans / SOPs as needed

{D} Non-Critical (3 pts)

29. Food equipment construction / repair
30. Facility construction (floors / walls) / repair
31. Housekeeping contributes to infestation
32. Non-food contact surfaces clean
33. Garbage / solid waste storage
34. Consumer advisories posted
35. Inspection report displayed for public
36. Other _____

{E} Corrections / Improvements Made / Comments:

#14 Provid. the food items are stored off of the floor

#29 Provid. for freezer gasket to be fixed.

As the person in charge of this facility, I understand I am responsible for food safety practices described in sections 229.163 (b) and 229.163 (c) of the Texas State Food Code. I understand that failure of employees to conduct a 20 second hand wash prior to starting work, after handling raw products or visiting the restroom and that failure to manage required temperature and time controls have a high risk of causing food-borne illness. I agree to implement corrective actions described in Part E to reduce the risk of food-borne illness.

Non-Critical Food Safety Rating ✓

Area	Superior	Above Average	Average	Minimal
Training				
Restrooms				
Housekeeping				
Equipment				
Construction				
Overall Rating				

HACCP Compliance Score = 6
 (Does not apply to consultations or follow-up visits)

 Person In Charge / Manager / Owner

 Evaluation by Registered Sanitarian

CITY OF HELOTES

12951 Bandera Road, Helotes, Texas 78023 (210) 695-8877

Mailing Address: P.O. Box 507, Helotes, TX 78023

Retail Food Establishment Inspection Report

Establishment: Sonic License # _____ RC: 3 Date: 4/29/2021
Purpose of Visit: Compliance Inspection Consultation Complaint Illness Investigation Other: _____

- {A} Critical Food Safety Controls (5 pts)**
(Critical control violations must be corrected on the spot)
1. Cold holding temperatures / time ✓
 2. Hot holding temperatures / time ✓
 3. Cooking temperatures / time cos ✓
 4. Proper cooling of foods / time ✓
 5. Rapid reheating of foods (temperature and time) ✓
 6. Food control surfaces clean and sanitized
{✓} cutting boards { } meat slicer { } food grinder
 7. Potential for cross-contamination to occur ✓
 8. RTE foods / no direct hand contact ✓
 9. Foods from approved sources / labeling ✓
 10. Foods protected from contamination ✓
 11. Other: _____
- #3 provide that product is cooked to the correct internal temp.

Critical Temperature Verification:

Food Item and Process	Temp (F°)
<u>Chill: 160° Meat Box</u>	<u>0°</u>
<u>Pry Cooler 40° Fryer 38° Fryer</u>	<u>0°</u>
<u>walk-in 38° walk-in</u>	<u>0°</u>

- {B} Facilities, Equipment and Food Storage (3 pts)**
12. Hand washing stations supplied and clean ✓
 13. Dishwashing / sanitizing (250 ppm/ _____ Temp.) ✓
 14. Food storage area meets code ✓
 15. Storage and use of toxic items ✓
 16. Evidence of insects or rodents / infestation ✓
 17. Sewage disposal / Grease trap ✓
 18. Thermometers provided / used ✓
 19. Plumbing / no cross-connections ✓
 20. Water supply / hot water 120° ✓
 21. Sewage disposal meets code ✓
 22. Other _____

- {C} Management and Personnel (4 pts)**
23. Manager on duty currently certified? ✓
 24. Manager demonstrates proper use of thermometer ✓
 25. Personnel with infections restricted / excluded ✓
 26. Proper hand washing demonstrated ✓
 27. Good hygienic practices observed ✓
 28. Written HACCP Plans / SOPs as needed ✓

- {D} Non-Critical (3 pts)**
29. Food equipment construction / repair ✓
 30. Facility construction (floors / walls) / repair ✓
 31. Housekeeping contributes to infestation ✓
 32. Non-food contact surfaces clean ✓
 33. Garbage / solid waste storage ✓
 34. Consumer advisories posted ✓
 35. Inspection report displayed for public ✓
 36. Other _____

{E} Corrections / Improvements Made / Comments:

As the person in charge of this facility, I understand I am responsible for food safety practices described in sections 229.163 (b) and 229.163 (c) of the Texas State Food Code. I understand that failure of employees to conduct a 20 second hand wash prior to starting work, after handling raw products or visiting the restroom and that failure to manage required temperature and time controls have a high risk of causing food-borne illness. I agree to implement corrective actions described in Part E to reduce the risk of food-borne illness.

Non-Critical Food Safety Rating ✓

Area	Superior	Above Average	Average	Minimal
Training				
Restrooms				
Housekeeping				
Equipment				
Construction				
Overall Rating				

HACCP Compliance Score = 5
(Does not apply to consultations or follow-up visits)

[Signature]
Person In Charge / Manager / Owner

[Signature]
Evaluation by Registered Sanitarian