

Quaternary
Sani

TRINITY COUNTY
DIVISION OF ENVIRONMENTAL HEALTH
FOOD PROGRAM OFFICIAL INSPECTION REPORT

DBA/NAME <i>Van Dyzen School Cafeteria</i>	DATE <i>3/20/2024</i>
ADDRESS	RECHECK DATE
OWNER/OPERATOR	SITE #
MAILING ADDRESS	CORRECT MAJOR VIOLATIONS BY:
FOOD CERT <i>Jenna L Thomas</i> EXP <i>11/12/2024</i>	CORRECT MINOR VIOLATIONS BY:

In = In Compliance N/O = Not Observed N/A = Not Applicable OUT = Out of Compliance COS = Corrected On-Site MAJ = Major Violation

IN	N/O	N/A	DEMONSTRATION OF KNOWLEDGE	COS	MAJ	OUT	IN	N/O	N/A	PROTECTION FROM CONTAMINATION	COS	MAJ	OUT
<input checked="" type="checkbox"/>			1. Demonstration of knowledge; food safety certification 9/18/2014					<input checked="" type="checkbox"/>		12. Proper procedures followed for returned and re-service of food			
EMPLOYEE HEALTH & HYGIENIC PRACTICES							FOOD FROM APPROVED SOURCES						
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>		2. Communicable disease; reporting, restrictions & exclusions				<input checked="" type="checkbox"/>			14. Food obtained from approved source			
<input checked="" type="checkbox"/>			3. No discharge from eyes, nose, and mouth				<input checked="" type="checkbox"/>			15. Shelf stock with completed tags, in good condition, properly stored/displayed		<input checked="" type="checkbox"/>	
<input checked="" type="checkbox"/>			4. Proper eating, tasting, drinking or tobacco use						<input checked="" type="checkbox"/>	16. Compliance with Gulf Oyster Regulations			
<input checked="" type="checkbox"/>			5. Hands clean and properly washed; gloves used properly							SPECIAL PROCEDURES			
<input checked="" type="checkbox"/>			6. Adequate handwashing facilities supplied & accessible						<input checked="" type="checkbox"/>	17. Compliance with variance, specialized process, reduced oxygen packaging, & HACCP Plan			
TIME AND TEMPERATURE RELATIONSHIPS													
<input checked="" type="checkbox"/>			7. Proper hot and cold holding temperatures					<input checked="" type="checkbox"/>		18. Consumer advisory provided for raw or undercooked foods			
<input checked="" type="checkbox"/>			8. Time as a public health control: Proper procedures & records				<input checked="" type="checkbox"/>			20. Licensed health care facilities/ public & private schools; prohibited foods not offered			
		<input checked="" type="checkbox"/>	9. Proper cooling methods							WATER & WASTE WATER			
<input checked="" type="checkbox"/>			10. Proper cooking time & temperatures				<input checked="" type="checkbox"/>			21. Hot and cold water available Temp			
		<input checked="" type="checkbox"/>	11. Proper reheating procedures for hot holding							LIQUID WASTE DISPOSAL			
							<input checked="" type="checkbox"/>			22. Sewage and wastewater properly disposed			
							VERMIN						
							<input checked="" type="checkbox"/>			23. No rodents, insects, birds, or animals			
							OUT						
SUPERVISION /PERSONAL CLEANLINESS							OUT						
25. Person in charge present and performs duties							39. Adequate ventilation and lighting; designated areas, use						
26. Personal cleanliness and hair restraints							40. Thermometers provided and accurate						
GENERAL FOOD SAFETY REQUIREMENTS							PHYSICAL FACILITIES						
27. Approved thawing methods used; frozen food maintained frozen.							42. Plumbing: Plumbing in good repair, proper backflow devices						
28. Food separated and protected							43. Garbage and refuse properly disposed; facilities maintained						
29. Fruits and vegetables washed as required.							44. Toilet facilities: properly constructed, supplied, cleaned						
30. Toxic substances properly identified, stored, used							45. Premises; personal/cleaning items; vermin-proofing						
FOOD STORAGE/ DISPLAY/ SERVICE							PERMANENT FOOD FACILITIES						
31. Food properly stored; food storage containers identified							46. Floor, walls and ceilings: properly built, maintained in good repair, and clean						
32. Consumer self-service facilities properly constructed and maintained							47. No unapproved private homes/ living or sleeping quarters						
33. Food properly labeled & honestly presented							SIGNS, MISC. REQUIREMENTS & ENFORCEMENT						
EQUIPMENT/ UTENSILS/ LINENS							48. Signs posted; last inspection report available						
34. Nonfood contact surfaces clean and in good repair.							49. Plan review required for new or remodel construction						
35. Warewashing facilities: Adequate, maintained, properly used, test strips available							50. Permits Available						
36. Equipment/ Utensils Approved; installed properly, clean; good repair, capacity							51. Impoundment of unsanitary equipment or food						
37. Equipment, utensils and linens: Properly stored and used							52. Permit Suspension						
38. Vending machines							53. Other						

OBSERVATIONS AND CORRECTIVE ACTIONS: *Need to label all foods that have been opened up, prepped or taken out of original packaging with a date. If bleach is too rough on the steel, using Quaternary Sanitization could be a solution, just make sure to use the appropriate test strips when using this Sanitizer.*

Reinspection fees will be charged for all subsequent reinspection unless an acceptable corrective time schedule has been submitted and approved by this Department. If, for any reasons beyond your control, you cannot correct the indicted violations by the next scheduled time, call this office prior to the inspection day.
□

TRINITY COUNTY
ENVIRONMENTAL HEALTH
61 AIRPORT RD
P.O. BOX 476
WEAVERVILLE, CA 96093
(530) 623-1459

R.E.H.S. *[Signature]*
RECEIVED BY: *Jenna Lynn Thomas*

Chlorine vs. Quat