HEALTH INSPECTION SUMMARY JUNE 2020

PART ONE--FOOD SAFETY REPORT



RECEIVED

JUL 1 3 2020

CITY OF HELOTES

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

Name of	Compliance	Rating	
Establishment	Score*		
B Daddy's	3	EXCELLENT	
Bobby J's	6	EXCELLENT	
Subway	8	EXCELLENT	
Subway Walmart	6	EXCELLENT	
Jugo	0	EXCELLENT	
Taco Bell	0	EXCELLENT	

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

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

1

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

Retail Food Establishment Inspection Report

CITY OF HELOTES

Ketan rood Establish	ment inspection Report	
Establishment: B Deddy's Lice	ense # RC: Date:	
Purpose of Visit: Compliance Inspection Consultation	☐ Complaint ☐ Illness Investigation ☐ Other:	
(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	{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	
 Cooking temperatures / time Proper cooling of foods / time Rapid reheating of foods (temperature and time) Food control surfaces clean and sanitized 	26. Proper hand washing demonstrated27. Good hygienic practices observed28. Written HACCP Plans / SOPs as needed	
{ } 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:	 {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	
Critical Temperature Verification: Food Item and Process Temp (F°)	#32 Provide for Now ful	
Walkin 38' Walkin 10	Chafer Serping 1, 30 Clon	
 {B} Facilities, Equipment and Food Storage (3 pts) 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		

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.

Area	Superior	Above Average	Average	Minimal
Training				
Restrooms				
Housekeeping				
Equipment	1			
Construction				
Overall Rating				

19. Plumbing / no cross-connections20. Water supply / hot water21. Sewage disposal meets code

22. Other ___

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

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

Retail Food Establishment Inspection Report

Establishment: 3.55, 5.5 Lic	cense #RC: Date: _6/28/202
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: 	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 Phon-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:
Critical Temperature Verification: Food Item and Process Temp (F°) [B] Facilities, Equipment and Food Storage (3 pts) 12. Hand washing stations supplied and clean 13. Dishwashing / sanifizing (#29 Pres Low land Needs Repaired Markets in Coule
As the person in charge of this facility, I understand I am respons 229.163 (c) of the Texas State Food Code. I understand that failure of after handling raw products or visiting the restroom and that failure	f employees to conduct a 20 second hand wash prior to starting work
after handling raw products or visiting the restroom and that failure 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 Minimal	
Area Superior Above Average Minimal Training	HACCP Compliance Score = (Does not apply to consultations or follow-up visits)
Hanning	(- 555 MPP) to conductations of follow-up visits)

Area Superior Above Average Minimal

Training

Restrooms

Housekeeping

Equipment

Construction

Overall Rating

Above Average Minimal

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

Person In Charge / Manager / Owner

Evaluation by Registered Sanitarian

12952 Budina

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

Retail Food Establishment Inspection Report

Establishment: Jubac. / Lic	ense # RC: Date: 6/2 8/20=
Purpose of Visit: Compliance Inspection Consultation	☐ Complaint ☐ Illness Investigation ☐ Other:
{A} Critical Food Safety Controls (5 pts)	{C} Management and Personnel (4 pts)
(Critical control violations must be corrected on the spot)	23. Manager on duty currently certified?
Cold holding temperatures / time	24. Manager demonstrates proper use of thermometer
2. Hot holding temperatures / time	25. Personnel with infections restricted / excluded
3. Cooking temperatures / time	26. Proper hand washing demonstrated
4. Proper cooling of foods / time	27. Good hygienic practices observed
5. Rapid reheating of foods (temperature and time)	28. Written HACCP Plans / SOPs as needed
6. Food control surfaces clean and sanitized	
{ } cutting boards { } meat slicer { } food grinder	{D} Non-Critical (3 pts) 29. Food equipment construction / repair
7. Potential for cross-contamination to occur	29. Food equipment construction / repair
8. RTE foods / no direct hand contact	30. Facility construction (floors / walls) / repair
9. Foods from approved sources / labeling	31. Housekeeping contributes to infestation 32. Non-food contact surfaces clean
10. Foods protected from contamination	33. Garbage / solid waste storage
11. Other:	34. Consumer advisories posted
\$ 3 Provide for Proper Scheat	35. Inspection report displayed for public
of Act balls	36. Other
* STatt Will Pergen 10 her	{E} Corrections / Improvements Made / Comments:
Mida:	(E) Corrections / improvements wade / Comments:
	# 12 Point for Sunt
Critical Temperature Verification:	Acar Townly Strekel at
Food Item and Process Temp (F°)	The state of the s
Collin 40' levellin 0°	all Musiak
Fiel 40 Chicken 40	
Jet Selle 1115	
{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 /7	
21. Sewage disposal meets code	
22. Other	
As the person in charge of this facility, I understand I am respons	ible 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,
areer handing raw products or visiting the restroom and that failure	to manage required temperature and time controls have a high risk

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 \(\sqrt{\text{Non-Critical Food Safety Rating V} \)

Area	Superior	Above Average	Average	Minima
Training		1		3
Restrooms				
Housekeeping				
Equipment				
Construction				
Overall Rating				

HACCP Compliance Score =	
(Does not apply to consultations or follow-up visits)	
Tell with	
Person In Charge / Manager / Owner	
1311	
Evaluation by Registered Sanitarian	E

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

Retail Food Establishment Inspection Report

Establishment: Subwy (Welmer) Lie	cense # RC:3 Date: 6/28/2020
Purpose of Visit: Compliance Inspection Consultation	☐ Complaint ☐ Illness Investigation ☐ Other:
{A} Critical Food Safety Controls (5 pts)	{C} Management and Personnel (4 pts)
(Critical control violations must be corrected on the spot)	23. Manager on duty currently certified?
Cold holding temperatures / time	24. Manager demonstrates proper use of thermometer
2. Hot holding temperatures / time	25. Personnel with infections restricted / excluded
Cooking temperatures / time	26. Proper hand washing demonstrated
4. Proper cooling of foods / time	27. Good hygienic practices observed
5. Rapid reheating of foods (temperature and time)	28. Written HACCP Plans / SOPs as needed
6. Food control surfaces clean and sanitized	
{ } cutting boards { } meat slicer { } food grinder	{D} Non-Critical (3 pts)
7. Potential for cross-contamination to occur	29. Food equipment construction / repair
8. RTE foods / no direct hand contact	30. Facility construction (floors / walls) / repair
9. Foods from approved sources / labeling	31. Housekeeping contributes to infestation
10. Foods protected from contamination	32. Non-food contact surfaces clean
11. Other:	33. Garbage / solid waste storage
	34. Consumer advisories posted
	35. Inspection report displayed for public
	36. Other
	{E} Corrections / Improvements Made / Comments:
Critical Temperature Verification:	
	It 12 Provide for Paper Towely
Food Item and Process Temp (F°)	at hendsinky
	422 1 1 1 11 11
	+ 31 Merid to Nen-trad
	Control Sustan To Sa Clem
{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 /20	
21. Sewage disposal meets code	
22. Other	
As the meson in change of this failt. Y	NI O O O O O O
229 163 (c) of the Toyos State Food Code, I understand I am response	sible for food safety practices described in sections 229.163 (b) and
after handling raw products or visiting the restroom and that failure of	of employees to conduct a 20 second hand wash prior to starting work,
of causing food-borne illness. I agree to implement corrective actions	e to manage required temperature and time controls have a high risk
Non-Critical Food Safety Rating √	described in Fair E to reduce the risk of food-borne limess.

Area Superior Above Average Minimal Average

Training

Restrooms

Housekeeping

Equipment

Construction

Overall Rating

HACCP Compliance Score =
(Does not apply to consultations or follow-up visits)
1/2/1
Person In Charge / Manager / Owner
17111
Evaluation by Registered Sanitarian

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

Retail Food Establishment Inspection Report

Establishme		Juga		1	License # RC: Date: 6/28/2020
Purpose of V	isit: 🔣	Compliance Ins	spection [Consultati	on Complaint Illness Investigation Other:
{A} Critical (Critical contr 1. Cold ho 2. Hot hold 3. Cooking 4. Proper of 5. Rapid re 6. Food co 6 } cutt 7. Potentia 8. RTE foo 9. Foods fr 10. Foods p	ol violate ding temper cooling of the cooling of the cooling of the cooling to th	afety Controls (ions must be comperatures / time peratures / time atures / time of foods / time of foods (temper faces clean and s ds { } meat slice ss-contamination direct hand conta roved sources / la from contaminat	5 pts) rected on the rature and ti canitized er { } food to occur ct beling ion	e spot) me) I grinder	C Management and Personnel (4 pts)
					- {E} Corrections / Improvements Made / Comments:
Food Item {B} Facilities 12. Hand was 13. Dishwas 14. Food sto 15. Storage as 16. Evidence 17. Sewage of 18. Thermon 19. Plumbing 20. Water su 21. Sewage of 22. Other	es, Equiposhing / sa rage are and use of inseedisposal meters prog / no cropply / holisposal	oment and Food ations supplied an initizing (3 p) a meets code of toxic items cts or rodents / in / Grease trap ovided / used oss-connections of water / 2 p	Storage (3 nd clean pm/T	emp.)	Locks buch
after handling r	e Texas; aw prod	state Food Code. ucts or visiting th	I understan	d that failure and that faile	onsible for food safety practices described in sections 229.163 (b) and the of employees to conduct a 20 second hand wash prior to starting work, the ure to manage required temperature and time controls have a high risk
of causing food-i	borne illi	ness. I agree to im Safety Rating √	plement cor	rective action	ons described in Part E to reduce the risk of food-borne illness.
Area	Superio		Average	Minimal	HACCP Compliance Score =
Training			L. II.	¥	(Does not apply to consultations or follow-up visits)
Restrooms					- Asabella and
Housekeeping					Person In Charge / Manager / Owner

Evaluation by Registered Sanitarian

Equipment Construction

Overall Rating

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

Retail Food Establishment Inspection Report

Establishment: 1000 Bell Lice	ense # RC: 3 Date: 6/28/2000
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 	{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
11. Other:	34. Consumer advisories posted 35. Inspection report displayed for public 36. Other [E] Corrections / Improvements Made / Comments:
Critical Temperature Verification: Food Item and Process Temp (F°) (B) Facilities, Equipment and Food Storage (3 pts) 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	Leeks Goods
As the person in charge of this facility, I understand I am responsi 229.163 (c) of the Texas State Food Code. I understand that failure of after handling raw products or visiting the restroom and that failure of causing food-borne illness. I agree to implement corrective actions of	employees to conduct a 20 second hand wash prior to starting work, to manage required temperature and time controls have a high risk
Non-Critical Food Safety Rating √	

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

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