

CITY OF HELOTES

HEALTH INSPECTION SUMMARY JULY 2022

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>
Dollar Tree	3	EXCELLENT
El Rodeo	11	GOOD
Dairy Queen	3	EXCELLENT
Tito's Mexican Snack Bar	6	EXCELLENT
Little Caesars	12	GOOD
Pizza Hut	7	EXCELLENT

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

- Market Days 7/2/2022
- Helotes Independence Day 7/3/2022
- Wine 101 7/7/2022
- Texas Grounds Coffee Company 7/14/2022

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

Retail Food Establishment Inspection Report

Establishment: Dollar Tree License # _____ RC: 2 Date: 7/29/2022
 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: _____

- {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 Provided for food
Items to be stored
a minimum of 6 inches
off the floor

Critical Temperature Verification:

Food Item and Process	Temp (F°)
<u>Walk-in 38° Walk-in 0°</u>	
<u>Freezer Section 0°</u>	
<u>Fridge Section 39°</u>	

- {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 _____

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 = 3/97
 (Does not apply to consultations or follow-up visits)
[Signature]
 Person In Charge / Manager / Owner
[Signature]
 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: El Rodco License # _____ RC: 3 Date: 7/29/2022
 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 605
 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: _____
#2 provide for hot hold
food items to maintain
Minum 135°
Cann caused 150°
Beans 145° Should Cook 150°

Critical Temperature Verification:

Food Item and Process	Temp (F°)
Walk-in <u>45° / 38° / 28°</u>	
Fridge <u>45° / 40°</u>	
Pop Cook <u>40°</u>	

- {B} Facilities, Equipment and Food Storage (3 pts)**
12. Hand washing stations supplied and clean
 13. Dishwashing / sanitizing (100 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:

#15 provide for spray
Bottles to be 105°F

#19 provide for food items
to be stored a min 6 inch
off the floor.

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 = 1/89
 (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: Daily Queen License # _____ RC: 3 Date: 7/29/2022
 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: _____

- {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:

33 Provided non-food contact surface to be cleaned.

Critical Temperature Verification:

Food Item and Process	Temp (F°)
<u>Walk-in 36°</u>	<u>Walk-in 0°</u>
<u>Pre Cook 40°</u>	<u>Fryer Oil 150°</u>
<u>Fridge Box 0°/10°</u>	<u>Chili 180°</u>

- {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 _____

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 = 3/7

(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: Ti To's Mexican Snack Bar License # _____ RC: _____ Date: 7/29/2022
 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: _____

- {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:

#15 Parid. for Toxic items to be properly stored.

#14 Parid. for food item to be properly stored, knock off the floor.

Critical Temperature Verification:

Food Item and Process	Temp (F°)
<u>Freezer 0/0°</u>	
<u>Prep Counter 42°</u>	
<u>Refr. 40°</u>	

- {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 _____

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 = 6/94
 (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: Little Caesars License # _____ RC: 3 Date: 7/27/2022
 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: _____

- {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:**

Critical Temperature Verification:

Food Item and Process	Temp (F°)
Walk-in 40°	
Prep Cooks 42°	
Freezer 20°	
Warmer 150°/155°	

#13 Provide for sanitizing buckets to be in place

#29 Provide for Door gaskets to be fixed. "Walk-in + Prep Cooks"

#32 Provide for Non-food contact Surfaces to be cleaned.

#14 Provide for Proper Food Storage, "Gather off the Floor"

- {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 _____

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 = 2/89
 (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: Pizza Hut License # _____ RC: 3 Date: 7/27/2022
 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: _____

- {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:**

Critical Temperature Verification:

Food Item and Process	Temp (F°)
Walk-in 39° Walk-in 20°	
Freezer 0°	
Warm Fry Cooker	
Warm 200°	

#26 Provide for proper and adequate hand wash

#32 Provide for Non-food Contact Surfaces to be cleaned

- {B} Facilities, Equipment and Food Storage (3 pts)**
12. Hand washing stations supplied and clean ✓
 13. Dishwashing / sanitizing (100 ppm / _____ Temp.) ✓
 14. Food storage area meets code (300 ppm) ✓
 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 _____

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 = 7/93
 (Does not apply to consultations or follow-up visits)

 Person In Charge / Manager / Owner

 Evaluation by Registered Sanitarian