



# 45 Days Notice Food Establishment Inspection Report

Pursuant to Title 25 of the District of Columbia Municipal Regulations



Government of the District of Columbia  
Department of Health  
Health Care Regulation & Licensing Administration  
Food Safety & Hygiene Inspections Services Division  
51 N Street, NE, Washington, DC 20002  
(202) 535-2180

	CRITICAL	NON CRITICAL
No. of Violations	0	1
No. of Repeat Violations	-	-
COS <u>Score (optional)</u>	-	0

Page 1 of 2  
Date 2/13/2007  
Time In 1:05 PM  
Time Out 1:45 PM

Establishment Name  
Gibbs Elementary School  
Address 1900 E Street, NE  
Washington, DC 20002  
Telephone 202-724-4576

License Holder  
Food Service Branch  
License/Customer No.  
53660XXX - 50005523 exp. 4/30/2008  
Certified Food Manager  
Shadonna R. Lewis  
Certified Food Manager Identification Card No.  
28150 exp. 6/2/2009  
ID Card Available Yes  No

Type of Inspection:  
 Preoperational  
 Follow-up  
 Complaint generated  
 Routine  
 HACCP  
 Other

Establishment Type:  
 Food Service 112A  Wholesaler/ Food  
 Food Market  Processor  
 Public Sch. Cafeteria

Risk Category:  
 High  Medium  Low

### CRITICAL ITEMS \* (RISK FACTORS AND INTERVENTIONS)

The letter to the left of each item indicates that item's status at the inspection.

In Compliance	Demonstration of Knowledge	COS	R
(Y) N	1. Correct response to questions	<input type="checkbox"/>	<input type="checkbox"/>
	<b>Employee Health</b>		
(Y) N	2. Exclusion, restriction and reporting	<input type="checkbox"/>	<input type="checkbox"/>
	<b>Good Hygienic Practices</b>		
(Y) N	3. Eating, tasting, drinking, or tobacco use	<input type="checkbox"/>	<input type="checkbox"/>
(Y) N	4. Discharge from eyes, nose, or mouth	<input type="checkbox"/>	<input type="checkbox"/>
	<b>Control of Hands as a Vehicle of Contamination</b>		
(Y) N	5. Clean hands, properly washed	<input type="checkbox"/>	<input type="checkbox"/>
(Y) N	6. Bare hand contact with ready-to-eat foods	<input type="checkbox"/>	<input type="checkbox"/>
(Y) N	7. Hand washing facilities	<input type="checkbox"/>	<input type="checkbox"/>
	<b>Approved Source</b>		
(Y) N	8. Food obtained from approved source	<input type="checkbox"/>	<input type="checkbox"/>
Y N <u>N/O</u>	9. Receiving temperature / condition	<input type="checkbox"/>	<input type="checkbox"/>
Y N <u>N/A</u>	10. Records: shellstock tags, parasite destruction, required HACCP plan	<input type="checkbox"/>	<input type="checkbox"/>
	<b>Protection from Contamination</b>		
(Y) N <u>N/A</u>	11. Food segregated, separated and protected	<input type="checkbox"/>	<input type="checkbox"/>
(Y) N <u>N/A</u>	12. Food contact surfaces clean and sanitized	<input type="checkbox"/>	<input type="checkbox"/>
(Y) N	13. Warewashing, sanitization, frequency, methods	<input type="checkbox"/>	<input type="checkbox"/>
Y N <u>N/O</u>	14. Returned / reservice of food	<input type="checkbox"/>	<input type="checkbox"/>
(Y) N	15. Discarding / reconditioning unsafe food	<input type="checkbox"/>	<input type="checkbox"/>
(Y) N	16. Controlling pests	<input type="checkbox"/>	<input type="checkbox"/>

In Compliance	Potentially Hazardous Food Time / Temperature	COS	R
Y N <u>N/O</u> <u>N/A</u>	17. Proper cooking, time and temperature	<input type="checkbox"/>	<input type="checkbox"/>
Y N <u>N/O</u> <u>N/A</u>	18. Reheating for hot holding	<input type="checkbox"/>	<input type="checkbox"/>
(Y) N <u>N/O</u> <u>N/A</u>	19. Cooling / Thawing	<input type="checkbox"/>	<input type="checkbox"/>
Y N <u>N/O</u> <u>N/A</u>	20. Hot holding	<input type="checkbox"/>	<input type="checkbox"/>
(Y) N <u>N/O</u> <u>N/A</u>	21. Cold Holding	<input type="checkbox"/>	<input type="checkbox"/>
(Y) N <u>N/O</u> <u>N/A</u>	22. Date marking and disposition	<input type="checkbox"/>	<input type="checkbox"/>
Y N <u>N/O</u> <u>N/A</u>	23. Time as a public health control (procedures / records)	<input type="checkbox"/>	<input type="checkbox"/>
	<b>Consumer Advisory</b>		
(Y) N <u>N/A</u>	24. Consumer advisory for raw or undercooked food	<input type="checkbox"/>	<input type="checkbox"/>
	<b>Highly Susceptible Populations</b>		
(Y) N <u>N/O</u> <u>N/A</u>	25. Pasteurized foods used, avoidance of prohibited foods	<input type="checkbox"/>	<input type="checkbox"/>
	<b>Chemical, Poisonous or Toxic Materials</b>		
(Y) N <u>N/A</u>	26. Additives / approved, unapproved	<input type="checkbox"/>	<input type="checkbox"/>
(Y) N	27. Toxic substances properly identified, stored, used	<input type="checkbox"/>	<input type="checkbox"/>
	<b>Conformance with Approved Procedures</b>		
Y N <u>N/A</u>	28. Compliance with variance and HACCP plan	<input type="checkbox"/>	<input type="checkbox"/>

R = repeat violation      Y = yes, in compliance      N = no, not in compliance  
COS = corrected on-site      N/O = not observed      N/A = not applicable

**\* VIOLATION OF SIX (6) OR MORE CRITICAL ITEMS THAT CANNOT BE CORRECTED ON SITE DURING THE COURSE OF THE INSPECTION RESULTS IN AUTOMATIC SUSPENSION & CLOSURE OF FOOD ESTABLISHMENT**

#### ADDITIONAL COMMENTS

Item/Location	Temp	Item/Location	Temp	Item/Location	Temp	Item/Location	Temp
Hot Water	116°F	Freezer	2°F	Ham & Cheese	42°F		
Refrigerator (*R2)	39°F	Refrigerator (*R1)	41°F	Milk	37°F		
Chocolate Milk	38°F	Diced Pear Cwd	32°F				



EHA

FOOD ESTABLISHMENT INSPECTION REPORT

Address: 500 19th St NE Date: April 20, 05  
 Name of Licensee: DC Public School Cafeteria Officer of Firm: Mattie Hall - CFS  
 Trading as: Gibbs Elem Sch Inspect. Time: 9:30/11:2 Customer #: 50005523  
 Food Service:  Retail Store  Other  Sanitation Rating: 92% Number of Samples Collected: 4-30-06  
 Shadonna Lewis

NOTICE TO ESTABLISHMENT  
 This inspection was conducted to determine compliance with District Regulations. Other underlined deficiencies must be Effective action must be taken this date to correct all underlined deficiencies having a demerit value of 6. Other underlined deficiencies must be corrected as indicated under "Remarks". Failure to make the indicated correction within the specified time may result in court proceedings being initiated for the enforcement thereof.

Zir-School  
Trash can

Section	Item	Demerits	Notes
A. STRUCTURE	1. Floors: clean - easily cleanable - in good repair - properly drained	2	
	2. Walls, ceiling and overhead: Clean - easily cleanable - no scaling paint - in good repair	2	
	3. Lighting: adequate for operation	2	
	4. Ventilation: rooms reasonably free from odors, condensation, smoke, etc.	2	
	5. Toilets/dressing rooms: clean - convenient - adequate - properly constructed and ventilated	2	
	6. Handwashing facilities: adequate - property located - soap and towels	6	
	7. Plumbing: potable water supply - sufficient hot and cold running water no back siphonage or cross connections - no overhead waste lines in critical areas	6	
<b>DEMERITS A</b>			0
B. EQUIPMENT	1. Installation: equipment location permits easy access to and cleaning of equipment and adjacent surfaces or properly sealed to adjacent surfaces	2	
	2. Refrigerated and hot food holding equipment: adequate - capable of maintaining proper food temperature - in good repair - provision for separation of raw and finished products	6	
	3. Food Contact surfaces of equipment and multi-use eating and cooking utensils: constructed of suitable material - free of cracks, crevices, chips, rust or paint - equipment easily disassembled and readily cleanable - clean and sanitized before each use - proper facilities and material available for cleaning and sanitizing	6	
	4. Non-food Contact surfaces: proper construction - clean - in good repair - suitable facilities and materials available for cleaning	6	
<b>DEMERITS B</b>			6
C. MEAT and MEAT PRODUCTS, INGREDIENTS, ICE, OTHER FOODS	1. (a) Source: approved (b) Trichinae treatment for appropriate product containing pork muscle tissue	6	
	2. Condition: sound - clean - unadulterated - only authorized food additives used	6	
	3. Labeling: proper - no false or misleading statements - products accurately described - accurate net weights	4	
	4. Temperature of potentially hazardous food: 45° F or less of 140°F or more - frozen foods at 0°F or below	6	
<b>DEMERITS C</b>			0
D. PERSONNEL	1. Outer garments: appropriate and washable - clean - proper hair restraints	2	
	2. Good apparent health	6	
	3. Hygienic practices: <u>Mattie Hall</u> (a) good personal hygiene - hand washed and clean - proper and minimal personal contact with food and food contact surfaces (b) Certified Food Supervisor	6	
<b>DEMERITS D</b>			0
E. GENERAL	1. Premises: no rodent harborage - effective vermin control - only permitted pesticides used and properly stored - premises free of trash and litter - no birds or unauthorized animals - facilities and materials available for cleaning	6	
	2. General storage: storage areas clean, adequate and properly utilized - food product ingredients, utensils and single service items protected from contamination - soiled linens and clean linens separated - contents of containers properly identified - poisonous materials properly labeled, handled and stored	6	
	3. Operating methods: food protected during display, packaging, processing and transportation - containers and wrappings sanitary - proper sequence of operations	6	
	4. Waste containers: <u>property constructed and used - clean</u>	6	
<b>DEMERITS E</b>			2
<b>TOTAL DEMERITS</b>			<u>8</u>

Ms. Coleman  
 area sup.  
 535-2186

REMARKS  
 H2O 111.8°F  
 Freezer 10°F

E-4 Provide a dumpster that have lids  
 Provide waste can inside of rest room with a lid  
 B-4 Temperature log must be posted daily last entry 4/20/05

INSPECTED BY Yvonne Wilkerson RECEIVED BY [Signature]  
 EHA 1004 ED 1/2000

EHA

CPS #14906 SHADONNA LEWIS EXP 2006

Person/Firm Gibbs E.S. Address 1900 E ST N.E

Reported by RONNIE TAYLOR, SANITARIAN Date 9-14-04

Subject: Continuation of Inspection Report  
Other Compliance, Inspection Report SR 92%

Reference

6	E1	SEAL two holes observed along the baseboard in large dry goods Room to eliminate possible rodent access, clean baseboard areas of spider webs w same Room
2	A1	Small dry goods RM; floor along the corners Hot food line @ Ham & cheese Cold milk @ 34. w/ FISS
8		total = 92% logs posted & current
		X <u>S Lewis</u> & title Reviewed by

REPORT SHEET

