



# 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 Score (optional)	-	0

Page 1 of 2  
 Date 2/27/2007  
 Time In 11:24AM  
 Time Out 11:53AM

Establishment Name Houston Elementary School  
 Address 1100 50th Place, NE  
Washington, DC 20018  
 Telephone 202-724-4626

License Holder Food Service Branch  
 License/Customer No. 01111XXX  
 Certified Food Manager Sheila A. Smith  
 Certified Food Manager Identification Card No. 20721 exp 6/3/2008  
 ID Card Available Yes  No

Type of Inspection:  
 Preoperational  Routine  
 Follow-up  HACCP  
 Complaint generated  Other  
 Establishment Type:  
 Food Service  Wholesaler/ Food  
 Food Market  Processor  
 Risk Category: Public Sch Cafeteria  
 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 N/O	9. Receiving temperature / condition	<input type="checkbox"/>	<input type="checkbox"/>
Y N N/A	10. Records: shellstock tags, parasite destruction, required HACCP plan	<input type="checkbox"/>	<input type="checkbox"/>
	<b>Protection from Contamination</b>		
(Y) N N/A	11. Food segregated, separated and protected	<input type="checkbox"/>	<input type="checkbox"/>
(Y) N N/A	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 N/O	14. Returned / reservice of food	<input type="checkbox"/>	<input type="checkbox"/>
Y N N/O	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 N/O N/A	17. Proper cooking, time and temperature	<input type="checkbox"/>	<input type="checkbox"/>
Y N N/O N/A	18. Reheating for hot holding	<input type="checkbox"/>	<input type="checkbox"/>
Y N N/O N/A	19. Cooling / Thawing	<input type="checkbox"/>	<input type="checkbox"/>
Y N N/O N/A	20. Hot holding	<input type="checkbox"/>	<input type="checkbox"/>
(Y) N N/O N/A	21. Cold Holding	<input type="checkbox"/>	<input type="checkbox"/>
(Y) N N/O N/A	22. Date marking and disposition	<input type="checkbox"/>	<input type="checkbox"/>
Y N N/O N/A	23. Time as a public health control (procedures / records)	<input type="checkbox"/>	<input type="checkbox"/>
	<b>Consumer Advisory</b>		
Y N N/A	24. Consumer advisory for raw or undercooked food	<input type="checkbox"/>	<input type="checkbox"/>
	<b>Highly Susceptible Populations</b>		
(Y) N N/O N/A	25. Pasteurized foods used, avoidance of prohibited foods	<input type="checkbox"/>	<input type="checkbox"/>
	<b>Chemical, Poisonous or Toxic Materials</b>		
Y N N/A	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 N/A	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	156°F	R:ice	41°F	Potatoes/Gravy/Beef	18°F	Refrigerator (R2)	40°F
Refrigerator	32°F	Broccoli	10°F	Pollock Fish Nuggets	28°F	M.I.K.	37°F
Salisbury Steak	35°F	Tomato Sauce/Beef/Spaghetti	12°F	Refrigerator (R2)	38°F	Chocolate Milk	38°F



FOOD ESTABLISHMENT INSPECTION REPORT

Address 1100 50<sup>th</sup> St NE Date March 23, 05  
 Name of Licensee Houston E.S. Officer of Firm Shelia Smith CFS/NGR  
 Trading as DC Public School Inspect. Time 903 Customer # 5005530  
 Food Service  Retail Store  Other  Sanitation Rating   
 Number of Samples Collected 4-30-06

NOTICE TO ESTABLISHMENT

This inspection was conducted to determine compliance with District Regulations. 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.

<b>A. STRUCTURE</b>		
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	<u>2</u>	
3. Lighting: adequate for operation <u>Shield</u>	<u>2</u>	
4. Ventilation: rooms reasonably free from odors, condensation, smoke, etc.	2	
5. Toilets/dressing rooms: clean - convenient - adequate - properly constructed <u>and ventilated</u>	<u>2</u>	
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>		<b>6</b>
<b>B. EQUIPMENT</b>		
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	
5. Cooking units, hoods and filters: clean - in good repair	2	
<b>DEMERITS B</b>		<b>0</b>
<b>C. MEAT and MEAT PRODUCTS, INGREDIENTS, ICE, OTHER FOODS</b>		
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>		<b>0</b>
<b>D. PERSONNEL</b>		
1. Outer garments: appropriate and washable - clean - proper hair restraints		2
2. Good apparent health		6
3. Hygienic practices: <u>Shelia A Smith</u> (a) good personal hygiene - hand washed and clean - proper and minimal personal contact with food and food contact surfaces <u>1105 4/2/05</u> (b) Certified Food Supervisor		6
<b>DEMERITS D</b>		<b>0</b>
<b>E. GENERAL</b>		
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: property constructed and used - clean		2
<b>DEMERITS E</b>		<b>0</b>

TOTAL DEMERITS **6**

Ms. Coleman  
Area Supervisor  
535-2186

REMARKS

Chicken Nugget 180°F  
 R1 Ref unit 40°F  
 R2 Ref unit 20°F  
 2 comp unit 133°F  
 Hand pink 109°F  
 A-2 Ceiling in storage area is leaking repair  
 A-3 Provide a cover for light in ref. unit  
 R-2  
 A-5 Repair the exhaust fan in rest room  
 Provide a self closing device for rest room door

INSPECTED BY Yvonne Stelken

RECEIVED BY Shelia A. Smith

Trans Urban Sch EHA School 3-23-05

