



5 & 45 Days notices

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	2	2
No. of Repeat Violations	—	—
COS Spec. (intervention)	0	0

Page 1 of 2
 Date 3/6/2007
 Time In 1:30 PM
 Time Out 2:02 PM

Establishment Name

Oyster Elementary School
2801 Calvert Street, NW
Washington, DC 20018

License Holder

Food Services Branch
 License/Customer No. 53600XXX-50005560 exp. 4/30/2008
 Certified Food Manager ~~John S. Watts~~ Not on Duty

Type of Inspection:

- Preoperational
 Follow-up
 Complaint generated
 Routine
 HACCP
 Other

Telephone

202-671-3117

Certified Food Manager Identification Card No.

15119 exp. 5/14/2007
 ID Card Available Yes No

Establishment Type:

- Food Service 1/2A 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"/>
(Y) N	Employee Health		
(Y) N	2. Exclusion, restriction and reporting	<input type="checkbox"/>	<input type="checkbox"/>
(Y) N	Good Hygienic Practices		
(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"/>
(Y) N	Control of Hands as a Vehicle of Contamination		
(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"/>
(Y) N	Approved Source		
(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"/>
(Y) N	Protection from Contamination		
(Y) N	11. Food segregated, separated and protected	<input type="checkbox"/>	<input type="checkbox"/>
(Y) N	12. Food contact surfaces clean and sanitized	<input type="checkbox"/>	<input type="checkbox"/>
Y N <u>N/O</u>	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 <u>N/O</u>	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> N/A	17. Proper cooking, time and temperature	<input type="checkbox"/>	<input type="checkbox"/>
Y N <u>N/O</u> N/A	18. Reheating for hot holding	<input type="checkbox"/>	<input type="checkbox"/>
Y N <u>N/O</u> N/A	19. Cooling / Thawing	<input type="checkbox"/>	<input type="checkbox"/>
Y N <u>N/O</u> 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 <u>N/O</u> N/A	23. Time as a public health control (procedures / records)	<input type="checkbox"/>	<input type="checkbox"/>
Y N	Consumer Advisory		
Y N <u>N/A</u>	24. Consumer advisory for raw or undercooked food	<input type="checkbox"/>	<input type="checkbox"/>
(Y) N	Highly Susceptible Populations		
(Y) N N/O N/A	25. Pasteurized foods used, avoidance of prohibited foods	<input type="checkbox"/>	<input type="checkbox"/>
Y N	Chemical, Poisonous or Toxic Materials		
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"/>
Y N	Conformance with Approved Procedures		
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
Mobile Refrigerator	41°F	Walk in Refrigerator					
Hot Water	116°F	Freezer	16°F				
Refrigerator	35°F						

NONCRITICAL ITEMS
GOOD RETAIL PRACTICES

		COS	R		COS	R		COS	R				
<input type="checkbox"/>	Food and non-food contact surfaces — Constructed, cleanable, usage	Yes	<input type="checkbox"/>	<input type="checkbox"/>	Plant food cooking	N/A	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Storage of equipment, utensil, linens, & single-service / single-use articles	Yes	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	Liquid waste disposal	Yes	<input type="checkbox"/>	<input type="checkbox"/>	Toilet facilities	Yes	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Physical facilities	No	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	Unnecessary exposure of utility lines	Yes	<input type="checkbox"/>	<input type="checkbox"/>	Garbage and refuse disposal	Yes	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Specialized processing methods	N/A	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	Equipment for temperature control	Yes	<input type="checkbox"/>	<input type="checkbox"/>	Food utensils/ in-use	No	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Other		<input type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="checkbox"/>	Personal cleanliness	No Yes	<input type="checkbox"/>	<input type="checkbox"/>	Thermometers	Yes	<input type="checkbox"/>	<input type="checkbox"/>					
<input type="checkbox"/>	Food labeled/ condition	Yes	<input type="checkbox"/>	<input type="checkbox"/>	Wiping cloths	Yes	<input type="checkbox"/>	<input type="checkbox"/>					

OBSERVATIONS	CORRECTIVE ACTIONS
Critical Items	5 DAYS to correct
No certified food protection manager on duty	25 DCMR 2203 Provide a certified food protection manager during all hours of operation
No handwashing sink	25 DCMR 2406 Provide a handwashing only sink in the kitchen
Non-Critical Item	45 DAYS to correct
Temperature log not up-to-date	Maintain an up-to-date temperature log
Employee not wearing a hair restraint	25 DCMR 502 All food handlers are required to wear hair restraints.
Area Supervisor: Mr. Ronnie Taylor 202-535-2183	

Person-in-Charge (Signature) *Shirley Barrow* (Print) Shirley Barrow Date 3/6/09

Inspector (Signature) *Ivory Gene Cooper* (Print) Ivory Gene Cooper Badge # 650 Date 3/6/2007

EHA

FOOD ESTABLISHMENT INSPECTION REPORT

Address 2801 Calvert Street NW Date 4/14/5
 Name of Licensee Oyster Elem School Officer of Firm LISA Walls
 Trading as Oyster Elem School Inspect. Time 9:45 Customer # 50005560
 Food Service Retail Store Other Sanitation Rating 94% Number of Samples Collected #

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.

A. STRUCTURE		C. MEAT and MEAT PRODUCTS, INGREDIENTS, ICE, OTHER FOODS	
1. Floors: clean - easily cleanable - in good repair - properly drained	2	1. (a) Source: approved (b) Trichinae treatment for appropriate product containing pork muscle tissue	6
2. Walls, ceiling and overhead: Clean - easily cleanable - no scaling paint - in good repair	2	2. Condition: sound - clean - unadulterated - only authorized food additives used	6
3. Lighting: adequate for operation	2	3. Labeling: proper - no false or misleading statements - products accurately described - accurate net weights	4
4. Ventilation: rooms reasonably free from odors, condensation, smoke, etc.	2	4. Temperature of potentially hazardous food: 45° F or less of 140°F or more - frozen foods at 0°F or below	6
5. Toilets/dressing rooms: clean - convenient - adequate - properly constructed and ventilated	2	DEMERITS C <u>4</u>	
6. Handwashing facilities: adequate - property located - soap and towels	6	D. PERSONNEL	
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	1. Outer garments: appropriate and washable - clean - proper hair restraints	2
DEMERITS A <u>0</u>		2. Good apparent health	6
B. EQUIPMENT		3. Hygienic practices: (a) good personal hygiene - hand washed and clean - proper and minimal personal contact with food and food contact surfaces (b) Certified Food Supervisor	6
1. Installation: equipment location permits easy access to and cleaning of equipment and adjacent surfaces or properly sealed to adjacent surfaces	2	DEMERITS D <u>0</u>	
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	E. GENERAL	
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	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
4. Non-food Contact surfaces: proper construction - clean - in good repair - suitable 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
5. Cooking units, hoods and filters: clean - in good repair	2	3. Operating methods: food protected during display, packaging, processing and transportation - containers and wrappings sanitary - proper sequence of operations	6
DEMERITS B <u>6</u>		4. Waste containers: property constructed and used - clean	2
		DEMERITS E <u>4</u>	
TOTAL DEMERITS <u>6</u>			

REMARKS

B2 - Milk Storage unit must be 45 degrees or below at all times. Unit was 51.3 at visit.

INSPECTED BY R. [Signature]

RECEIVED BY Lisa Walls