



GEORGIA DEPARTMENT OF HUMAN RESOURCES
Food Service Establishment Inspection Report

Establishment Name: Bennetts Mill Middle School
Address: 210 Lester Rd

City: Fayetteville **Time In:** 8:30 am **Time Out:** 9:30 am

Inspection Date: 5/9/2011 **CFSM:** Maureen Harbin

Purpose of Inspection: Routine: Follow-Up: Complaint:
Preliminary: Other:

Risk Type: 1 2 3 **Permit#:** 2-57349

'Risk Factors are food preparation practices and employee behaviors most commonly reported to the Centers for Disease Control and Prevention as contributing factors in foodborne illness outbreaks. Public Health Interventions are control measures to prevent illness or injury.

'Good Retail Practices are preventive measures to control the introduction of pathogens, chemicals, and physical objects into foods.

Last Score: **100** Grade: **A** Date: **9/20/10**

Prior Score: **100** Grade: **A** Date: **5/4/10**

CURRENT SCORE **CURRENT GRADE**
100 **A**

SCORING AND GRADING: A=90-100 B=80-89 C=70-79 U<69

FOODBORNE ILLNESS RISK FACTORS AND PUBLIC HEALTH INTERVENTIONS

(Mark designated compliance status (IN, OUT, NA, or NO) for each numbered item. For items marked OUT, mark COS or R for each item as applicable. Deduct points for category or subcategory.)

IN=in compliance OUT=not in compliance NO=not observed NA=not applicable COS=corrected on-site during inspection R=repeat (violation of the same code provision)=2 points per subcategory

Compliance Status					COS	R
1	IN	OUT	NA	NO	Supervision 4 points	
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	1-2. Person in charge present, demonstrates knowledge, and performs duties	
2	IN	OUT	NA	NO	Employee Health, Good Hygienic Practices, Preventing Contamination by Hands-Subcategory 1 9 points	
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	2-1A. Proper use of restriction & exclusion	
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	2-1B. Hands clean and properly washed	
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	2-1C. No bare hand contact with ready-to-eat foods or approved alternate method properly followed	
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Employee Health, Good Hygienic Practices-Subcategory 2 4 points	
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	2-2A. Management awareness; policy present; reporting	
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	2-2B. Proper eating, tasting, drinking, or tobacco use	
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	2-2C. No discharge from eyes, nose, and mouth	
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	2-2D. Adequate handwashing facilities supplied & accessible	
3	IN	OUT	NA	NO	Approved Source 9 points	
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	3-1A. Food obtained from approved source; parasite destruction	
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	3-1B. Food received at proper temperature	
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	3-1C. Food in good condition, safe, and unadulterated	
4	IN	OUT	NA	NO	Protection from Contamination-Subcategory 1 9 points	
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	4-1A. Food separated and protected	
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	4-1B. Proper disposition of contaminated food; returned food or unused food not re-served	
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Protection from Contamination-Subcategory 2 4 points	
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	4-2A. Food stored covered	
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	4-2B. Food-contact surfaces: cleaned & sanitized	

Compliance Status					COS	R
5	IN	OUT	NA	NO	Cooking and Reheating of Potentially Hazardous Foods, Consumer Advisory-Subcategory 1 9 points	
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	5-1A. Proper cooking time and temperatures	
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	5-1B. Proper reheating procedures for hot holding	
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	Consumer Advisory-Subcategory 2 4 points	
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	5-2. Consumer advisory provided for raw and undercooked foods	
6	IN	OUT	NA	NO	Holding of Potentially Hazardous Foods, Date Marking Potentially Hazardous Food-Subcategory 1 9 points	
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	6-1A. Proper cold holding temperatures	
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	6-1B. Proper hot holding temperatures	
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	6-1C. Proper cooling time and temperature	
<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	6-1D. Time as a public health control: procedures and records	
<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Date Marking-Subcategory 2 4 points	
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	6-2. Proper date marking and disposition	
7	IN	OUT	NA	NO	Highly Susceptible Populations 9 points	
<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	7-1. Pasteurized foods used; profibited foods not offered	
8	IN	OUT	NA	NO	Chemicals 4 points	
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	8-2A. Food additives: approved and properly used	
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	8-2B. Toxic substances properly identified, stored, used	
9	IN	OUT	NA	NO	Conformance with Approved Procedures 4 points	
<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	9-2. Compliance with variance, specialized process and HACCP plan	

GOOD RETAIL PRACTICES

(Mark the numbered item OUT, if not in compliance. For items marked OUT, mark COS or R for each item as applicable. R=Repeat (violation of the same code provision) = 1 point per

Compliance Status					COS	R
10	OUT	Safe Food and Water, Food Identification 3 points				
<input type="radio"/>	<input type="radio"/>	10A. Pasteurized eggs used where required				
<input type="radio"/>	<input type="radio"/>	10B. Water and ice from approved source				
<input type="radio"/>	<input type="radio"/>	10C. Variance obtained for specialized processing methods				
<input type="radio"/>	<input type="radio"/>	10D. Food properly labeled; original container; required records available; shellstock tags				
11	OUT	Food Temperature Control 3 points				
<input type="radio"/>	<input type="radio"/>	11A. Proper cooling methods used; adequate equipment for temperature control				
<input type="radio"/>	<input type="radio"/>	11B. Plant food properly cooked for hot holding				
<input type="radio"/>	<input type="radio"/>	11C. Approved thawing methods used				
<input type="radio"/>	<input type="radio"/>	11D. Thermometers provided and accurate				
12	OUT	Prevention of Food Contamination 3 points				
<input type="radio"/>	<input type="radio"/>	12A. Contamination prevented during food preparation, storage, display				
<input type="radio"/>	<input type="radio"/>	12B. Personal cleanliness				
<input type="radio"/>	<input type="radio"/>	12C. Wiping cloths: properly used and stored				
<input type="radio"/>	<input type="radio"/>	12D. Washing fruits and vegetables				
13	OUT	Postings and Compliance with Clean Air Act 3 points				
<input type="radio"/>	<input type="radio"/>	13A. Posted: Permit/Inspection/Choking Poster/Handwashing				
<input type="radio"/>	<input type="radio"/>	13B. Compliance with Georgia Smoke Free Air Act				

Compliance Status					COS	R
14	OUT	Proper Use of Utensils 1 point				
<input type="radio"/>	<input type="radio"/>	14A. In-use utensils: Properly stored				
<input type="radio"/>	<input type="radio"/>	14B. Utensils, equipment and linens: properly stored, dried, handled				
<input type="radio"/>	<input type="radio"/>	14C. Single-use/single-service articles: properly stored, used				
<input type="radio"/>	<input type="radio"/>	14D. Gloves used properly				
15	OUT	Utensils, Equipment and Vending 1 point				
<input type="radio"/>	<input type="radio"/>	15A. Food & nonfood-contact surfaces cleanable, properly designed, constructed, used				
<input type="radio"/>	<input type="radio"/>	15B. Warewashing facilities: installed, maintained, used; test strips				
<input type="radio"/>	<input type="radio"/>	15C. Nonfood-contact surfaces clean.				
16	OUT	Water, Plumbing and Waste 2 points				
<input type="radio"/>	<input type="radio"/>	16A. Hot and cold water available; adequate pressure				
<input type="radio"/>	<input type="radio"/>	16B. Plumbing installed; proper backflow devices				
<input type="radio"/>	<input type="radio"/>	16C. Sewage and waste water properly disposed				
17	OUT	Physical Facilities 1 point				
<input type="radio"/>	<input type="radio"/>	17A. Toilet facilities: properly constructed, supplied, cleaned				
<input type="radio"/>	<input type="radio"/>	17B. Garbage/refuse properly disposed; facilities maintained				
<input type="radio"/>	<input type="radio"/>	17C. Physical facilities installed, maintained, and clean				
<input type="radio"/>	<input type="radio"/>	17D. Adequate ventilation and lighting; designated areas used				
18	OUT	Pest and Animal Control 3 points				
<input type="radio"/>	<input type="radio"/>	18. Insects, rodents, and animals not present				

Person in Charge (Signature): _____ **(Print)** _____ **Date:** 5/9/2011 8:30:00 AM

Inspector (Signature): _____ **Follow-up:** Yes No **Follow-up Date:** _____

Food Service Establishment Inspection Report Addendum

Violations cited in this report must be corrected within the time frames specified below, or as stated in the Georgia Department of Human Resources Rules and Regulations Food Service Chapter 290-5-14, Rule .10 subsection (2)(i) and (j)

Establishment Bennetts Mill Middle School	Permit 2-57349	Date InspectionDate2
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Address 210 Lester Rd	City/State Fayetteville, GA 30215	Zip Code 30215
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TEMPERATURE OBSERVATIONS

Item/Location	Temp	Item/Location	Temp	Item/Location	Temp
Pass thru hot R	167	37	" milk		
" L	165	37	Green Beans Cook		
Pass thru cold Cheese R	39	184			
" L 37	Milk L		DW at dish		
38	" R	168	4 Comp sink quat		
35	WIC Turkey Thaw	200ppm+			
35	" ham thaw				
34	" cheese				

OBSERVATIONS AND CORRECTIVE ACTIONS

Item Number	

Person in Charge (Signature)

Date

Inspector (Signature)

Date 5/9/2011 8:30:00 AM

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Item Number	OBSERVATIONS AND CORRECTIVE ACTIONS
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Person in Charge (Signature) _____ **Date** _____

Inspector (Signature) _____ **Date** 5/9/2011 8:30:00 AM