



GEORGIA DEPARTMENT OF HUMAN RESOURCES
Food Service Establishment Inspection Report

Establishment Name: Flat Rock Middle School
Address: 325 Jenkins Rd

City: Tyrone Time In: 10:45 am Time Out: 11:45 am

Inspection Date: 5/3/2011 CFSM: Connie Earwood

Purpose of Inspection: Routine: [X] Follow-Up: [] Complaint: []
Preliminary: [] Other: []

Risk Type: 1 [] 2 [X] 3 [] Permit#: 1-9364

'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: 8/12/10

Prior Score: 99 Grade: A Date: 10/5/09

CURRENT SCORE: 98 CURRENT GRADE: 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

Table with 5 columns: Compliance Status, IN, OUT, NA, NO, Description, COS, R. Includes sections for Supervision, Employee Health, Approved Source, and Protection from Contamination.

Table with 5 columns: Compliance Status, IN, OUT, NA, NO, Description, COS, R. Includes sections for Cooking and Reheating, Consumer Advisory, Holding of Potentially Hazardous Foods, Date Marking, Highly Susceptible Populations, Chemicals, and Conformance with Approved Procedures.

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

Table with 5 columns: Compliance Status, IN, OUT, NA, NO, Description, COS, R. Includes sections for Safe Food and Water, Food Temperature Control, Prevention of Food Contamination, Postings and Compliance with Clean Air Act.

Table with 5 columns: Compliance Status, IN, OUT, NA, NO, Description, COS, R. Includes sections for Proper Use of Utensils, Utensils, Equipment and Vending, Water, Plumbing and Waste, Physical Facilities, and Pest and Animal Control.

Person in Charge (Signature): (Print) Date: 5/3/2011 10:45:00 AM
Inspector (Signature): Follow-up: Yes [] No [X] 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 Flat Rock Middle School	Permit 1-9364	Date InspectionDate2
Address 325 Jenkins Rd	City/State Tyrone, GA 30290	Zip Code 30290

TEMPERATURE OBSERVATIONS

Item/Location	Temp	Item/Location	Temp	Item/Location	Temp
Milk	38	Milk WIC	38		
service line cut fruit	43	WIF	1		
" sliced tomatoes	40				
" yams	148	DW at dish	176		
Hot hold cheese stix	166	4 comp sink quat	200ppm		
Cold hold	40				
Chicken thaw WIC	30				
Ranch WIC	39				

OBSERVATIONS AND CORRECTIVE ACTIONS

Item Number	OBSERVATIONS AND CORRECTIVE ACTIONS
S14	14-C Ensure service spoons/ladels in drawer are stored with handles in one direction. Corrected.
S17	17-C Need to clean ceiling of WIF, spill on floor of WIF and wall at dishline hand sink. Secure hand sink to wall and reseal to wall. 17-D Need to clean ceiling vents in kitchen and service lines. Need to replace cracked light cover in dish area.

Person in Charge (Signature)	Date
Inspector (Signature)	Date 5/3/2011 10:45:00 AM

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Person in Charge (Signature) _____ **Date** _____

Inspector (Signature) _____ **Date** 5/3/2011 10:45:00 AM