



GEORGIA DEPARTMENT OF HUMAN RESOURCES
Food Service Establishment Inspection Report

Establishment Name: Grace Christian Academy
Address: 355 McDonough Rd

City: Fayetteville, **Time In:** 10:45 am **Time Out:** 11:45 am

Inspection Date: 5/5/2011 **CFSM:** Rose Wheeler

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

Risk Type: 1 ○ 2 ● 3 ○ **Permit#:** 1-9365

'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	Grade	Date
100	A	3/2/11

Prior Score	Grade	Date
100	A	8/25/10

CURRENT SCORE	CURRENT GRADE
<h1>90</h1>	<h1>A</h1>
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
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
2-1A. Proper use of restriction & exclusion						
●	○					
2-1B. Hands clean and properly washed						
●	○					
2-1C. No bare hand contact with ready-to-eat foods or approved alternate method properly followed						
●	○					
Employee Health, Good Hygienic Practices-Subcategory 2					4	points
2-2A. Management awareness; policy present; reporting						
●	○					
2-2B. Proper eating, tasting, drinking, or tobacco use						
●	○					
2-2C. No discharge from eyes, nose, and mouth						
●	○					
2-2D. Adequate handwashing facilities supplied & accessible						
●	○					
3	IN	OUT	NA	NO		
●	○					
Approved Source					9	points
3-1A. Food obtained from approved source; parasite destruction						
○	○					
3-1B. Food received at proper temperature						
○	○					
3-1C. Food in good condition, safe, and unadulterated						
○	○					
4	IN	OUT	NA	NO		
●	○					
Protection from Contamination-Subcategory 1					9	points
4-1A. Food separated and protected						
●	○					
4-1B. Proper disposition of contaminated food; returned food or unused food not re-served						
○	○					
Protection from Contamination-Subcategory 2					4	points
4-2A. Food stored covered						
○	○					
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
5-1A. Proper cooking time and temperatures						
○	○					
5-1B. Proper reheating procedures for hot holding						
○	○					
Consumer Advisory-Subcategory 2					4	points
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
6-1A. Proper cold holding temperatures						
○	○					
6-1B. Proper hot holding temperatures						
○	○					
6-1C. Proper cooling time and temperature						
○	○					
6-1D. Time as a public health control: procedures and records						
○	○					
Date Marking-Subcategory 2					4	points
6-2. Proper date marking and disposition						
○	○					
7	IN	OUT	NA	NO		
○	○					
Highly Susceptible Populations					9	points
7-1. Pasteurized foods used; profibited foods not offered						
○	○					
8	IN	OUT	NA	NO		
○	○					
Chemicals					4	points
8-2A. Food additives: approved and properly used						
○	○					
8-2B. Toxic substances properly identified, stored, used						
○	○					
9	IN	OUT	NA	NO		
○	○					
Conformance with Approved Procedures					4	points
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
10A. Pasteurized eggs used where required						
○						
10B. Water and ice from approved source						
○						
10C. Variance obtained for specialized processing methods						
○						
10D. Food properly labeled; original container; required records available; shellstock tags						
○						
11	OUT					
○						
Food Temperature Control					3	points
11A. Proper cooling methods used; adequate equipment for temperature control						
○						
11B. Plant food properly cooked for hot holding						
○						
11C. Approved thawing methods used						
○						
11D. Thermometers provided and accurate						
○						
12	OUT					
○						
Prevention of Food Contamination					3	points
12A. Contamination prevented during food preparation, storage, display						
○						
12B. Personal cleanliness						
○						
12C. Wiping cloths: properly used and stored						
○						
12D. Washing fruits and vegetables						
○						
13	OUT					
○						
Postings and Compliance with Clean Air Act					3	points
13A. Posted: Permit/Inspection/Choking Poster/Handwashing						
○						
13B. Compliance with Georgia Smoke Free Air Act						
○						

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

Person in Charge (Signature):	(Print)	Date: 5/5/2011 10:45:00 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 Grace Christian Academy	Permit 1-9365	Date InspectionDate2
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Address 355 McDonough Rd	City/State Fayetteville,, GA 30214	Zip Code 30214
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TEMPERATURE OBSERVATIONS

Item/Location	Temp	Item/Location	Temp	Item/Location	Temp
2 door cooler/milk	43				
2 door cooler/sliced cheese	43				
2 door/weiner	43				
wamrer/corn pups	138				
138	warmer/mac and chees				
140					

OBSERVATIONS AND CORRECTIVE ACTIONS

Item Number	Observations and Corrective Actions
S15	15B QA sanitizer test strips were not provided.

Person in Charge (Signature)

Date

Inspector (Signature)

Date 5/5/2011 10:45:00 AM

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

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