

FOR OFFICE USE ONLY



EMAIL

NAME OF ESTABLISHMENT: Rainbow Mexican Food ADDRESS OR LOCATION: 1830 S. Burlington Blvd CITY: Blvd

MEALS SERVED: B L D C O PURPOSE OF INSPECTION:  Routine  Preoperational  Reinspection  Illness Investigation  Temporary  Complaint  Other: ESTABLISHMENT TYPE: RISK CATEGORY:

MEALS OBSERVED: B L D C O DATE: 5/25/18 TIME IN: 1:30p ELAPSED TIME: 30 TOTAL POINTS: 0 RED POINTS: REPEAT RED: PHONE:

**RED HIGH RISK FACTORS**

High Risk Factors are improper practices or procedures identified as the most prevalent contributing factors of foodborne illness or injury. Circles indicate compliance status (IN, OUT, N/O, N/A) for each item.

#	Compliance Status	Description	CDI	R	PTS	#	Compliance Status	Description	CDI	R	PTS
<b>Demonstration of Knowledge</b>											
1	IN	PIC certified by accredited program, or compliance with Code, or correct answers	<input type="checkbox"/>	<input type="checkbox"/>	5	16	IN	Proper cooling procedures	<input type="checkbox"/>	<input type="checkbox"/>	25
2	IN	Food Worker Cards current for all food workers; new food workers trained	<input type="checkbox"/>	<input type="checkbox"/>	5	17	IN	Proper hot holding temperatures (5 pts if 130°F to 134°F)	<input type="checkbox"/>	<input type="checkbox"/>	25 (5)
<b>Employee Health</b>											
3	IN	Proper ill worker and conditional employee practices; no ill workers present; proper reporting of illness	<input type="checkbox"/>	<input type="checkbox"/>	25	18	IN	Proper cooking time and temperature; proper use of noncontinuous cooking	<input type="checkbox"/>	<input type="checkbox"/>	25
<b>Preventing Contamination by Hands</b>											
4	IN	Hands washed as required	<input type="checkbox"/>	<input type="checkbox"/>	25	19	IN	No room temperature storage; proper use of time as a control	<input type="checkbox"/>	<input type="checkbox"/>	25
5	IN	Proper barriers used to prevent bare hand contact with ready-to-eat foods	<input type="checkbox"/>	<input type="checkbox"/>	25	20	IN	Proper reheating procedures for hot holding	<input type="checkbox"/>	<input type="checkbox"/>	15
6	IN	Adequate handwashing facilities	<input type="checkbox"/>	<input type="checkbox"/>	10	21	IN	Proper cold holding temperatures (5 pts if 42°F to 45°F)	<input type="checkbox"/>	<input type="checkbox"/>	10 (5)
<b>Approved Source, Wholesome, Not Adulterated</b>											
7	IN	Food obtained from approved source	<input type="checkbox"/>	<input type="checkbox"/>	15	22	IN	Accurate thermometer provided and used to evaluate temperature of PHFs	<input type="checkbox"/>	<input type="checkbox"/>	5
8	IN	Water supply, ice from approved source	<input type="checkbox"/>	<input type="checkbox"/>	15	<b>Consumer Advisory</b>					
9	IN	Proper washing of fruits and vegetables	<input type="checkbox"/>	<input type="checkbox"/>	10	23	IN	Proper Consumer Advisory posted for raw or undercooked foods	<input type="checkbox"/>	<input type="checkbox"/>	5
10	IN	Food in good condition, safe and unadulterated; approved additives	<input type="checkbox"/>	<input type="checkbox"/>	10	<b>Highly Susceptible Populations</b>					
11	IN	Proper disposition of returned, previously served, unsafe, or contaminated food	<input type="checkbox"/>	<input type="checkbox"/>	10	24	IN	Pasteurized foods used as required; prohibited foods not offered	<input type="checkbox"/>	<input type="checkbox"/>	10
12	IN	Proper shellstock ID; wild mushroom ID; parasite destruction procedures for fish	<input type="checkbox"/>	<input type="checkbox"/>	5	<b>Chemical</b>					
<b>Protection from Cross Contamination</b>											
13	IN	Food contact surfaces and utensils used for raw meat thoroughly cleaned and sanitized; no cross contamination	<input type="checkbox"/>	<input type="checkbox"/>	15	25	IN	Toxic substances properly identified, stored, used	<input type="checkbox"/>	<input type="checkbox"/>	10
14	IN	Raw meats below or away from ready-to-eat food; species separated	<input type="checkbox"/>	<input type="checkbox"/>	5	<b>Conformance with Approved Procedures</b>					
15	IN	Proper handling of pooled eggs	<input type="checkbox"/>	<input type="checkbox"/>	5	26	IN	Compliance with risk control plan, variance, plan of operation; valid permit; approved procedures for noncontinuous cooking	<input type="checkbox"/>	<input type="checkbox"/>	10
<b>Red Points</b> <u>0</u>											

**BLUE LOW RISK FACTORS**

Low Risk Factors are preventive measures to control the addition of pathogens, chemicals, and physical objects into foods. Circled points indicate items not in compliance.

#	Description	CDI	R	PTS	#	Description	CDI	R	PTS	
<b>Food Temperature Control</b>										
28	Food received at proper temperature	<input type="checkbox"/>	<input type="checkbox"/>	5	<b>Utensils and Equipment</b>					
29	Adequate equipment for temperature control	<input type="checkbox"/>	<input type="checkbox"/>	5	40	Food and nonfood surfaces properly used and constructed; cleanable	<input type="checkbox"/>	<input type="checkbox"/>	5	
30	Proper thawing methods used	<input type="checkbox"/>	<input type="checkbox"/>	3	41	Warewashing facilities properly installed, maintained, used; test strips available and used	<input type="checkbox"/>	<input type="checkbox"/>	5	
<b>Food Identification</b>										
31	Food properly labeled	<input type="checkbox"/>	<input type="checkbox"/>	5	42	Food-contact surfaces maintained, cleaned, sanitized	<input type="checkbox"/>	<input type="checkbox"/>	5	
<b>Protection from Contamination</b>										
32	Insects, rodents, animals not present; entrance controlled	<input type="checkbox"/>	<input type="checkbox"/>	5	43	Nonfood-contact surfaces maintained and clean	<input type="checkbox"/>	<input type="checkbox"/>	3	
33	Potential food contamination prevented during delivery, preparation, storage, display	<input type="checkbox"/>	<input type="checkbox"/>	5	<b>Physical Facilities</b>					
34	Wiping cloths properly used, stored; proper sanitizer	<input type="checkbox"/>	<input type="checkbox"/>	5	44	Plumbing properly sized, installed, and maintained; proper backflow devices, indirect drains; no cross-connections	<input type="checkbox"/>	<input type="checkbox"/>	5	
35	Employee cleanliness and hygiene	<input type="checkbox"/>	<input type="checkbox"/>	3	45	Sewage, wastewater properly disposed	<input type="checkbox"/>	<input type="checkbox"/>	5	
36	Proper eating, tasting, drinking, or tobacco use	<input type="checkbox"/>	<input type="checkbox"/>	3	46	Toilet facilities properly constructed, supplied, cleaned	<input type="checkbox"/>	<input type="checkbox"/>	3	
<b>Proper Use of Utensils</b>										
37	In-use utensils properly stored	<input type="checkbox"/>	<input type="checkbox"/>	3	47	Garbage, refuse properly disposed; facilities maintained	<input type="checkbox"/>	<input type="checkbox"/>	3	
38	Utensils, equipment, linens properly stored, used, handled	<input type="checkbox"/>	<input type="checkbox"/>	3	48	Physical facilities properly installed, maintained, cleaned; unnecessary persons excluded from establishment	<input type="checkbox"/>	<input type="checkbox"/>	2	
39	Single-use and single-service articles properly stored, used	<input type="checkbox"/>	<input type="checkbox"/>	3	49	Adequate ventilation, lighting; designated areas used	<input type="checkbox"/>	<input type="checkbox"/>	2	
<b>Blue Points</b> <u>0</u>										

Use the following blank lines to write comments.

Person In Charge (Signature): [Signature] Person In Charge (Print Name): J. Volive, Crn Date: 5/25/18  
 Regulatory Authority (Signature): [Signature] Regulatory Authority (Print Name): Jeanne King Follow-up Needed? Yes  No