and NN	Fa.	CEODOIA DEDADTMENT OF DUDI	10.11	E A I	TH				CURRENT COORE	CURRENT ORAS	-	
21	· ·	GEORGIA DEPARTMENT OF PUBL Food Service Establishment Inspec							CURRENT SCORE	CURRENT GRAD	JE	
All Control) Ji	Establishment Name: ASHTON MANOR AT SUGAR										
COUNTY H	EALTH	Address: 1155 Lawrenceville Hwy										
City:	awrence	ville Time In: 09:35 AM Time	Out	:_	04:1	<u>5 PM</u>						
Inspectio	n Date:	01/25/2024										
Purpose	of Inspe	ction: Routine Follow-up O Compliant O				ade	Da	te				
Prelimina		Other O	9	6	/	Δ (09/11/	2023	43			
Risk Type	e: 1 ()	2 3 Permit#: 067-FSP-26606	Dalas F									
Risk	Factors a	are important practices or procedures as the most	Prior S		1	ade	Da	te				
	10 C	ctors in foodborne illness outbreaks. Public Health	6	4		U	09/01	/2023				
Inter	ventions	are control measures to prevent illness or injury.						s	CORING AND GRADING: A=9	0-100 B=80-89 C=70-79	U≤6	59
		FOODBORNE ILLNESS RISK FACT	FOR	S	AND	PU	BLIC	HEA	LTH INTERVENTIONS			
		(Mark designated compliance status (IN, OUT, NA, or NO) for each	10.00.00.0									
		T=not in compliance NO=not observed NA=not applicable	11.55	T					spection R=Repeat violation of			
	liance S		cos	-	-	Co	mpi	ance a	Status Cooking and Reheating		cos	R
1 IN OU	T NA NO	The property of the state of th		oints	_	5 IN	OUT	NA NO	Cooking and Reheatin		9 poi	ints
\simeq	0	1-2A PIC present, demonstrates knowledge, performs duties 1-2B Certified Food Protection Manager	_	o				00	Consumer A 5-1A Proper cooking time as		0	0
		Employee Health, Good Hygienic Practices,			4		X		5-1B Proper reheating proce			Ö
2 IN OU	T NA NO	Preventing Contamination by Hands			.		O	OC	5-16 Proper reneating proce	dures for not holding	No.	VI 10
		2-1A Proper use of restriction & exclusion		Oints	_	1_			5-2 Consumer advisory prov	vided for raw and	4 po	
\succeq		2-18 Hands clean and properly washed	ŏ			0	0		undercooked foods	idea for faw and	0	0
		2-1C No bare hand contact with ready-to-eat foods or							Holding of TO	S Foods		
		approved alternate method properly followed	0	0		6 IN	OUT	NA NO	Date Marking of		9 po	inte
			4 p	oints		0		00	6-1A Proper cold holding ter		_	•
)	2-2A Management knowledge, responsibilities, reporting		0		Ŏ	Ŏ		6-1B Proper hot holding tem		-	0
		2-2B Proper eating, tasting, drinking, or tobacco use	0	-	I	Ŏ	Ŏ		6-1C Proper cooling time an	N. P. S.		0
ŎČ	Ò	2-2C No discharge from eyes, nose, and mouth	0				0		6-1D Time as a public healt			
O O		2-2D Adequate handwashing facilities supplied & access blooming	e •			0	O		and records	in T vi	0	0
)	2-2E Response procedures for vomiting & diarrheal event	s O	0							4 po	ints
3 IN OU	T NA NO	Approved Source	9 p	oints	8	0		OC	6-2 Proper date marking and	d disposition	•	0
)	3-1A Food obtained from approved source	0	0		7 IN	OUT	NA NO	Highly Susceptible	e Populations	9 po	ints
\circ		3-1B Food received at proper temperature	0	0			0	\circ	7-1 Pasteurized foods used	Prohibited foods not	0	0
\circ		3-1C. Food in good condition, safe, and unadulterated		0			U	O	offered		_	U
00		3-1D Required records: shellstock tags, parasite destruction	10	0				NA NO		ATTIVITY	4 po	_
	T NA NO			oints	_		0	0	8-2A Food additives: approv	ed and properly used	0	0
	OO	4-1A Food separated and protected	0	0	2	0			8-2B Toxic substances prop	erly identified, stored,		0
• C)	4-1B Proper disposition of returned, previously served,	0	0					used		_	
		reconditioned, and unsafe food		Sec.	▋₽	9 IN	OUT	NA NO			4 po	ints
		4-2A Food stored covered	_	oints	_	0	0		9-2 Compliance with variance and HACCP plan	e, specialized process	0	0
		4-28 Food-contact surfaces: cleaned & sanitized	0	00	_				and rixcor plan			
		GOOD I	_	_		ACTI	CES					
	Mark the n	umbered item OUT, if not in compliance. For items marked OUT, ma							. R = Repeat Violation of the same	code provision = 1 point)		
		Good Retail Practices are preventive measures to control										
Comp	liance S	Status	cos	R		Co	mpli	iance s	Status		cos	R
10 OU	Т	Safe Food and Water, Food Identification	3 p	oints	s	14 (TUC		Proper Use of Ute	nsils	1 pc	oint
O		asteurized eggs used where required		0					use utensils: properly stored			0
0		Vater and ice from approved source	0	0		-			nsils, equipment and linens: prop			0
0	10C. V	ariance obtained for specialized processing methods		0		-	-		gle-use/single-service articles: p oves used properly	roperly stored, used		00
0	10D. F	ood properly labeled; original container	0	0		15 (DUT	140. 0	Utensils, Equipment an	d Vending		oint
11 OU	Т	Food Temperature Control	3 p	oints	s			15A. Fo	od and nonfood-contact surfa			
0	11A. P	roper cooling methods used: adequate equipment for	0		1				designed, constructed, and	The state of the s	1000	0
	temper	rature control	1.55						rewashing facilities: installed, ma		0	Ō
0		lant food properly cooked for hot holding	0			10		15C. No	onfood-contact surfaces clear		_	0
Ö		pproved thawing methods used hermometers provided and accurate	0	00		16 (TUC	16A Ho	Water, Plumbing and ot and cold water available; ad		2 po	O
12 OU		Prevention of Food Contamination	1000	oints	1		_		umbing installed; proper back			ŏ
	124 0	contamination prevented during food preparation, storage		1	1				wage and waste water prope		-	Ŏ
0	display	1	0		1	17 (TUC		Physical Facilit	ies	1 pc	oint
		ersonal cleanliness		-		-			ilet facilities: properly construc			0
O		Viping cloths: properly used and stored Vashing fruits and vegetables		-		-			rbage/refuse properly dispose sysical facilities installed, main			00
13 OU		Postings and Compliance with Clean Air Act		oint	1 1				equate ventilation and lighting;	To the state of th	ĕ	ŏ
•	13A. P	osted: Permit/Inspection/Choking Poster/Handwashing	•	-		18 (TUC	and Alaska	Pest and Animal C		3 po	ints
•	13B. C	compliance with Georgia Smoke Free Air Act		0			0	18. Inse	cts, rodents, and animals not	present	0	0
Person in	Charge	(Signature)		N	(Drint)	Da	phne	May	Date: 0	1/25/2024		
r craon in	Sharge	orginature)			(Print)				Date.			
Inspector	(Signatu	re) ANA EHS				Fol	low-u	ib: AE	S ■ NOO Follow-u	p Date: <u>01/25/2024</u>		

Food Service Establishment Inspection Report Addendum Page 2____ of 4____ Violations cited in this report must be corrected within the time frames specified below, or as stated in the Georgia Department of Public Health Rules and Regulations Food Service Chapter 511-6-1, Rule .10 subsections (2)(h) and (i). Establishment ASHTON MANOR AT SUGARLOAF Permit # 067-FSP-26606 Date 01/25/2024

City/State

Lawrenceville

GA

Zip Code

30046

TEMPERATURE OBSERVATIONS					
Item/Location	Temp	Item/Location	Temp	Item/Location	Temp
Butter (discard) / Dining tables	80	Butter (discard) / Prep counter	74	Chicken (discard) / Hot hold unit	113
iquid egg (discard) / Walk-in cooler	42	Milk (cooling 0min) / Walk-in cooler	57	Milk (cooling 1hr35-discard) / Ice bath	50
Fruit crisp (reheat-hot hold 0min) / Walk-in cooler	40	Fruit crisp (reheat-hot hold 1hr30) / Oven	200	Sour cream (discard) / Reach-in cooler	43
Burger (final cook) / Grill	192	Chicken (final cook) / Oven	167	1	
		/		/	
		1		1	
		1		1	
		1		1	

Item Number

Address

1155 Lawrenceville Hwy

OBSERVATIONS AND CORRECTIVE ACTIONS

- 1-2A: .03(2)(a)-(l), (n) (Repeat) NCOS Correct By: 02/02/2024 Due to today's unsatisfactory score, the person-in-charge was not able to demonstrate active managerial control in the facility. **SECOND CONSECUTIVE VIOLATION** It is the responsibility of the person in charge to ensure compliance with the food code by demonstrating active managerial control within their facility. (Pf)
- 1-2B: .03(3)(c) NCOS Correct By: 02/02/2024 Facility's CFSM does not have certificate posted. The original CFSM certificate shall be posted in public view in each food service establishment. An additional copy shall be retained on file at the food service establishment at all times, and shall be made available for inspection by the Health Authority. (Pf)
- 2-2D: .07(3)(b) (Repeat) COS Hand sink closest to three-compartment sink in kitchen does not have paper towels. **SECOND CONSECUTIVE VIOLATION** Paper towels were placed at hand sink. Each handwashing sink shall be provided with individual, disposable towels, a continuous towel system that supplies the user with a clean towel, or a hand drying device. (Pf)
- 3-1C: .04(3)(e) COS Observed multiple cans with dents along the hermetic seals. Cans were segregated to be returned. Food packages shall be in good condition and protect the integrity of the contents so that the food is not exposed to adulteration or potential contaminants. (Pf)
- 4-2B: .05(7)(c) NCOS Correct By: 02/02/2024 Observed multiple microwaves in facility with significant buildup inside. The cavities and door seals of microwave ovens shall be cleaned at least every 24 hours by using the manufacturer's recommended cleaning procedure. (C)
- 6-1A: .04(6)(f) (Repeat) COS Observed multiple time/temperature control for safety foods holding at temperatures above 41F (see temp log). **SECOND CONSECUTIVE VIOLATION** Items were discarded. Time/temperature control for safety food shall be maintained at 41°F (5°C) or below. (P)
- 6-2: .04(6)(g) COS Observed multiple commercially packaged ready-to-eat foods (sliced cheese and liquid egg) opened more than 24 hours ago without date marks on them. Items were datemarked. Except as specified in paragraphs 4 through 6 of this subsection, refrigerated, ready-to-eat, time/temperature control for safety food prepared and packaged by a food processing plant shall be clearly marked, at the time the original container is opened in a food service establishment and if the food is held for more than 24 hours, to indicate the date or day by which

the food shall be consumed on the premises, sold, or discarded, when held at a temperature of 41°F (5°C) or below for a maximum of 7 days after the original container is opened. The day the original container is opened in the food service establishment shall be counted as Day 1, except, the day or date marked by the food service establishment may not exceed a manufacturer's use by date if the manufacturer determined the use-by date based on food safety. (Pf)

- 8-2B: .07(6)(c) COS Observed lighters stored above oven and microwave in kitchen. Lighters were moved to proper storage location. Poisonous or toxic materials shall be stored so they cannot contaminate food, equipment, utensils, linens, and single-service and single-use articles by:
- 1. Separating the poisonous or toxic materials by spacing or partitioning; (P) and
- 2. Locating the poisonous or toxic materials in an area that is not above food, equipment, utensils, linens, and single-service or single-use articles. This requirement does not apply to equipment and utensil cleaners and sanitizers that are stored in warewashing areas for availability and convenience if the materials are stored to prevent contamination of food, equipment, utensils, linens, and single service and single-use articles. (P)
- 12B: .03(5)(i) COS Observed employee handling food and clean dishes in satellite kitchen without hair restraint. Employee put on hair restraint. Employees preparing or handling food shall use effective and clean, disposable or easily cleanable nets or other hair restraints approved by the Health Authority, worn properly to restrain loose hair including beards and mustaches longer than one half inch (1/2"). (C)
- 12B: .03(5)(g) COS Observed person-in-charge handling food with Apple watch on. Watch was removed. Food employees may not wear jewelry including medical information jewelry on their arms and hands while preparing food (except for a plain ring such as a wedding band). (C)
- 12C: .04(4)(m) COS Observed wiping cloths being stored in sanitizer with too low of a concentration. Sanitizer was remade. Cloths in-use for wiping counters and other equipment surfaces shall be stored in sanitizer of the appropriate concentration in-between uses and laundered daily. (C)

Person in Charge (Signature)	Date 01/25/2024
Inspector (Signature)	Date 01/25/2024

Establishment ASHTON MANOR AT SUGARLOAF	sections (2)(h) and (i). Permit # 067-FSP-26606	Date 01/25/2024
Address .155 Lawrenceville Hwy	City/State Lawrenceville	Zip Code GA 30046
Itom	DBSERVATIONS AND CORRECTIVE ACT	
12C: .04(4)(m) COS Observed multiple sanitizer buckets off the floor and used in a manner that prevents contamina		
13A: .02(1)(c)2 COS Facility does not have choking posterplace approved by the department - in public view.		
13B: .02(1)(c)2 COS Facility does not have "No smoking" to new or existing establishments, the applicant shall provide that apply to the location, construction and maintenance of	de evidence of satisfactory compliance with the provisions	of this Chapter and all other provisions of laws
14B: .05(10)(e) 1,2,4 NCOS Correct By: 02/02/2024 Obse stored in a self-draining position that allows air drying and o		exposed. Clean equipment and utensils shall be
15B: .05(3)(h),(i) NCOS Facility does not have proper test sanitizing solution shall be accurately determined by using	•	e-compartment sink. Concentration of the
15C: .05(7)(a)2,3 COS Observed multiple mugs and a foor recleaned and sanitized. Nonfood-contact surfaces of equip	•	
17D: .07(4)(b) COS Observed employee phone, chargers for employees to eat, drink, and use tobacco shall be locate contamination. (C)	•	
Person in Charge (Signature)		Date 01/25/2024
nspector (Signature)		Date 01/25/2024

Food Service Establishn	nent Inspection Report Ad	dendum Page 4 of 4
Violations cited in this report must be corrected within to Regulations Food Service Chapter 511-6-1, Rule .10 sub		Georgia Department of Public Health Rules and
Establishment ASHTON MANOR AT SUGARLOAF	Permit # 067-FSP-26606	Date 01/25/2024
Address L155 Lawrenceville Hwy	City/State Lawrenceville	GA Zip Code 30046
Item Number	DBSERVATIONS AND CORRECTIVE	ACTIONS
Comments:		
Note: Permit has been suspended due to two consecutive unote: Permit has been reinstated after onsite training.	unsatisfactory scores on routine inspections.	
Note: A follow-up inspection will occur on or before 02/02/20 Note: Three or more consecutive repeat violations on routing Note: A required additional routine inspection will occur on o	ne inspections will occur in a permit suspension.	
Note: All cold-holding and hot-holding in compliance unless Note: Facility uses additives such as vanilla and lemon extr		
Questions/comments? 770-963-5132 or gnrhealth.com		
Person in Charge (Signature)		Date 01/25/2024
		D-4- 04 (05 (000 4
nspector (Signature)		Date 01/25/2024