



EMD016020+DAAS0RIHW+04-21-2023



County of Sacramento

Retail Food Facility

Official Inspection Report

Date:	04/21/2023
Page:	1 of 2

ESTABLISHMENT NAME: SAINT MEL'S SCHOOL Permit Holder: DIOCESE OF SACRAMENTO

Address: 4745 Pennsylvania Ave City Fair Oaks Zip Code 95628 Phone (916) 967-2814

FA FA0005603	PR PR0007038	Type of Inspection INSPECTION
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Program Identifier

Items listed on this report as violations do not meet the requirements set forth in the California Health and Safety Code commencing with section 7; 113700. All violations must be corrected within specified timeframe. Violations that are classified as "Major" pose an immediate threat to public health and have the potential to cause foodborne illness. All major violations must be corrected immediately. Non-compliance may warrant immediate closure of the food facility.

6.HANDWASHING FACILITIES

Observations: Paper towel dispenser is stocked but not functional, unable to get paper towels out. Correct within 3 days.

Code Description: Handwashing facilities shall be provided within or adjacent to toilet rooms, food preparation, and warewashing areas. Handwashing facilities shall be clean, unobstructed, and accessible at all times. Handwashing facilities shall be provided with soap and sanitary single-use towels or heated-air hand drying device in approved dispensers. Dispensers shall be maintained in good repair. Handwashing facilities shall be available within 200 feet of outdoor barbecues. Handwashing facilities shall be separated from warewashing sink and food contact surfaces by at least 24-inches or by a minimum 6-inch high splash guard. (113953, 113953.1, 113953.2, 114067(f), 114143(e))

45.FLOOR, WALL, AND CEILING FINISHES

Observations: Observed missing rubber coved base in storage portion of kitchen. Missing coving is creating slight crevice in wall. Replace within 4 months.

Code Description: Food facilities shall be fully enclosed in a building consisting of permanent floors, walls, and an overhead structure that meets minimum standards. The walls and ceiling shall be smooth, durable, nonabsorbent, and easily cleanable. Flooring and base coving shall be smooth, durable, and made of approved nonabsorbent material that is easily cleanable. Floor surfaces shall be coved at the juncture of the floor and wall with a 3/8 inch minimum radius and shall extend up the wall at least 4 inches. (114143 (d), 114266, 114268, 114271, 114272)

49.PERMIT REQUIREMENTS

Observations: Permit posted has expired. Locate and post current permit within 7 days.

Code Description: A food facility shall not be open for business without a valid permit. Permit shall be posted in a conspicuous place within the food facility. (114067(b, c), 114381, 114387)



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OBSERVATIONS

Name on Food Safety Certificate _____ Expiration Date _____

Warewash Chlorine (Cl) _____ ppm Quaternary Ammonia (QA) _____ ppm Heat _____ °F DDBSA _____ ppm

Water/Hot Water Ware Sink Temp 120 °F Hand Sink Temp 100 °F Wiping Cloth _____ ppm

FOOD ITEM / LOCATION / TEMP °F DOCUMENTATION

NOTES

AT THIS TIME KITCHEN IS ONLY USED FOR STAGING PREPACKAGED FOOD FROM THIRD PARTY COMPANY. EDUCATION PROVIDED ON TPHC FOR FOOD ITEMS.

THE FOLLOWING SHALL BE ADDRESSED AT WHICH TIME THE KITCHEN IS USED FOR COOKING ACTIVITIES:

1. HOUSEHOLD MICROWAVE ON PREP COUNTER. REPLACE WITH COMMERCIAL GRADE.
2. ENSURE MANUAL WAREWASHING SANITIZER IS AVAILABLE (BLEACH OR QUATERNARY AMMONIA)

STATUS
<input checked="" type="checkbox"/> GREEN - Pass
<input type="checkbox"/> YELLOW - Conditional Pass; Reinspection required
<input type="checkbox"/> RED- Closed; Suspension of permit to operate
<input type="checkbox"/> Placard program not applicable at this time
ACTIONS
<input type="checkbox"/> Photographic documentation obtained
<input type="checkbox"/> Compliance conference required
<input type="checkbox"/> Food / equipment impounded (50)
<input type="checkbox"/> Food safety education required; # of employees _____
<input type="checkbox"/> Permit Suspension; facility closure required

The person in charge is responsible for ensuring that the above mentioned facility is in compliance with all applicable sections of the California Health and Safety Code. If a reinspection is required, fees may be assessed as authorized by current Sacramento County Code, Chapter 6.99.150.

Accepted by: _____

Name and Title: emailed to / Yvonne, PIC

Specialist: E. Torres Phone: (916) 639-3407

Co-Inspector: _____