

\*EMD016020+DA10024240+05-08-2024\*



### **County of Sacramento**

Date: 05/08/2024 Page: 1 of 2

## Retail Food Facility Official Inspection Report

ESTABLISHMENT NAME: SAINT MEL'S SCHOOL		Permit Holder: DIOCESE OF SACRAMENTO			
Address: 4745 Pennsylvania Ave	City	Fair Oaks	Zip Code <u>95628</u>	Phone (916) 967-2814	
FA0005603	PR PR0007038		Type of Inspection INSPECTION		
Program Identifier					
Items listed on this report as violations do not meet All violations must be corrected within specified time potential to cause foodborne illness. All major violati	eframe. Violations that are cla	assified as "Major" pose a	an immediate threat to publi	lic health and have the	

#### 23. VERMIN AND ANIMAL CONTAMINATION

**Observations**: Observed 1 dead adult turkestan in dry storage area. Remove evidence. Clean and sanitize affected area.

**Code Description:** A food facility shall at all times be equipped, maintained, and operated as to prevent the entrance and harborage of animals, birds, and vermin, including, but not limited to rodents and insects. Service animals as defined in section 113903 may be permitted in areas that are not used for food preparation and that are usually open for consumers if a health or safety hazard will not result from the presence or activities of the service animal. (113903, 114259, 114259.1, 114259.4, 114259.5)

#### 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 3 months. REPEAT VIOLATION.

**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)



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Address: 4745 Pennsylvania Ave	City	Fair Oaks	Zip Code 95628	Phone (916) 967-2814	
FA	PR	37	Type of Inspection		
FA0005603	PR0007038		INSPECTION		
Program Identifier					
Items listed on this report as violations do not meet the All violations must be corrected within specified times potential to cause foodborne illness. All major violations	frame. Violations that are cla	assified as "Major" pose a	n immediate threat to publi	c health and have the	
OBSERVATIONS					
Name on Food Safety Cortificate		Evniration Date	•		
Name on Food Safety Certificate		Expiration Date	-	_	
	ternary Ammonia (QA) °F Hand Sink Temp 1	ppm Heat			
	- Si Si	Viping Citi	ppm		
FOOD ITEM / LOCATION / TEMP °F DOCUME	NTATION				
juice / 2-door refrigerator / 36F					
<u>NOTES</u>					
AT THIS TIME KITCHEN IS ONLY USE	D FOR STAGING PRE	PACKAGED FOOD F	ROM THIRD PARTY (	COMPANY.	
EDUCATION PROVIDED ON TPHC FC	OR FOOD ITEMS.				
THE FOLLOWING SHALL BE ADDRES	SSED AT WHICH TIME	THE KITCHEN IS US	SED FOR COOKING A	CTIVITIES:	
1. HOUSEHOLD MICROWAVE ON PRI	EP COUNTER. HOUSE	HOLD CROCKPOTS	S IN DRY STORAGE. F	REPLACE WITH	
COMMERCIAL GRADE.					
2. ENSURE MANUAL WAREWASHING	SANITIZER IS AVAILA	ABLE (BLEACH OR C	<b>QUATERNARY AMMOI</b>	NIA)	
STATUS	The person in charge is re-	sponsible for ensuring that	the above mentioned facility	is in compliance with all	
☑ GREEN - Pass	applicable sections of the (	California Health and Safet	the above mentioned facility y Code. If a reinspection is rety Code, Chapter 6.99.150.	equired, fees may be	
☐ YELLOW - Conditional Pass; Reinspection required	assessed as admonzed by	current Sacramento Coun	ity Code, Chapter 6.99.150.		
□ RED- Closed; Suspension of permit to operate					
☐ Placard program not applicable at this time	Accorted by:				
ACTIONS	Accepted by:				
☐ Photographic documentation obtained	Name and Title: em	ailed to / Yvonne, P	IC		
☐ Compliance conference required		anda to / Tvoring, I	1 September 1 September 1		
☐ Food / equipment impounded (50)	Specialist: E. To	rres	Phone: (916)	639-3407	
☐ Food safety education required; # of employees	\- <u></u>				
□ Permit Suspension; facility closure required	Co-Inspector:				