

FOOD FACILITY INSPECTION REPORT

GLENN COUNTY ENVIRONMENTAL HEALTH DEPARTMENT

247 North Villa Avenue, Willows, CA 95988
Phone (530) 934-6102 FAX (530) 934-6103

Name of Facility/ DBA: <u>GLENN MEDICAL CENTER</u>		Inspection Date: <u>11/26/17</u>	
Address: <u>1133 W. SYCAMORE ST., WILLOWS, CA</u>		Reinspection Date (on or after): <u>NEXT INSPECTION</u> <small>(Reinspections are subject to fees)</small>	
Owner/Permittee: <u>GLENN MEDICAL CENTER INC.</u>	Phone No.:	Inspection Time: <u>11:00</u>	Permit Exp. Date:
Certified Food Handler: <u>TERLIE BUTLER</u>		Certificate Expiration Date: <u>1/27/20</u> <small>(Certificate expires five years after it is issued)</small>	
Service: <input type="checkbox"/> Routine Inspection <input type="checkbox"/> Reinspection <input type="checkbox"/> Complaint <input type="checkbox"/> Construction/Pre-opening <input type="checkbox"/> Other:			
Applicable Law CALIFORNIA RETAIL FOOD CODE ("CalCode"), Beginning with section 113700, California Health and Safety Code (See reverse side of sheet for summary)			

In = In compliance		N/A = Not Applicable		N/O = Not Observed		Maj = Major violation		Out = Items not in compliance		COS = Corrected On Site	
Critical Risk Factors for Disease						Maj	Out	COS		Out	COS
In					1. Demonstration of knowledge					24. Person in charge present and performs duties	
In					2. Communicable disease restrictions					25. Personal cleanliness and hair restraints	
In	N/O				3. Discharge of eyes, nose, mouth					26. Approved thawing methods used	
In	N/O				4. Eating, tasting, drinking, tobacco use					27. Food separated and protected	
In	N/O				5. Hands clean & properly washed, glove use					28. Washing fruits and vegetables	
In					6. Handwashing facilities available					29. Toxic substances properly identified, stored and used	
In	N/A	N/O			7. Proper hot and cold food holding temps					30. Food storage, 31. Self service, 32. Labeled	
In	N/A				8. Time as a public health control, records					33. Nonfood contact surfaces clean	
In	N/A	N/O			9. Proper cooling methods					34. Warewashing facilities maintained, test strips	
In	N/A	N/O			10. Proper cooking time and temps					35. Equipment, utensils, approved, clean good repair	
In	N/A	N/O			11. Reheating temperature for hot holding					36. Equipment, utensils and linens, storage and use	
In	N/A	N/O			12. Returned and reservice of food					37. Vending Machines	
In					13. Food safe and unadulterated					38. Adequate ventilation and lighting	
In	N/A	N/O			14. Food contact surfaces clean and sanitized					39. Thermometers provided and accurate	
In					15. Food from approved source					40. Wiping cloths properly used and stored	
In	N/A	N/O			16. Shell stock tags, 17. Gulf Oyster regs					41. Plumbing, proper backflow prevention	X
In	N/A	N/O			18. Compliance with HACCP plan					42. Garbage properly disposed; facilities maintained	
In	N/A	N/O			19. Advisory for raw/undercooked food					43. Toilet facilities supplied, properly constructed, clean	
In	N/A				20. Health care/ School prohibited food					44. Premises clean, vermin proof; personal items separate	
In					21. Hot & cold water. Temp: <u>170</u> °F					45. Floors, walls and ceilings maintained and clean	
In					22. Wastewater properly disposed					46. No unapproved living or sleeping quarters	
In					23. No rodents, insects, birds, animals					47. Signs posted; Permit & inspection report available	
										48. Plan Review Required	

No PHF []					
°F	Food	Location	°F	Food	Location
155	HAMBURGER PATTY	ATOP S. TABLE	39	EGGS	WALK-IN FRIDGE
39	TURKEY	ATOP P. COOLER			
38	RANCH	BELOW P. COOLER			
37	MILK	ARTIC AIR FRIDGE			

Comments:
 - NO CRITICAL VIOLATIONS.
 ** FACILITY IS CLEAN & WELL MAINTAINED **
 CORRECT THE FOLLOWING:
 (1) REPAIR LEAKY FAUCET ON THE HAND SINK NEAR THE WALK-IN FREEZER.

Received By: Terlie Butler REHS: Andrew Perry