Followup Fee of $50.00 after First Followup

Retail Food Establishment Inspection Report

City of Rockwall

- ☑ First aid kit
- ☑ Allergy policy
- ☑ Vomit clean up
- ☑ Employee health

Date:	Time in:	Time out:	License/Permit #	CPFM	Food handlers	Page 1 of 2
5/26/26	9:50	11:30	FS-8810	5	20	

Purpose of Inspection: ☑ 1-Routine ☐ 2-Follow Up ☐ 3-Complaint ☐ 4-Investigation ☐ 5-CO/Construction ☐ 6-Other ☐ **TOTAL/SCORE**

Establishment Name:	Contact/Owner Name:	Number of Repeat Violations: ___ / Number of Violations COS: ___	
Texas Health Hospital Coffee Bar	Nichole Anguiano		0/100/A

Physical Address:	Pest control :	Hood	Grease trap :/ waste oil	Follow-up: Yes ☐ No ☑
3150 Horizon Rd, Rockwall, TX 75032	Refer to Cafe report	N/a	Refer to cafe report	

Compliance Status: **Out** = not in compliance **IN** = in compliance **NO** = not observed **NA** = not applicable **COS** = corrected on site **R** = repeat violation W= Watch
Mark the appropriate points in the **OUT** box for each numbered item. Mark '✓' a checkmark in appropriate box for **IN, NO, NA, COS**. Mark an ✗ in appropriate box for **R**

Priority Items (3 Points) *violations Require Immediate Corrective Action not to exceed 3 days*

Compliance Status							Compliance Status						
OUT	IN	NO	NA	COS	Time and Temperature for Food Safety (F = degrees Fahrenheit)	R	OUT	IN	NO	NA	COS	Employee Health	R
		✔			1. Proper cooling time and temperature			✔				12. Management, food employees and conditional employees; knowledge, responsibilities, and reporting	
	✔				2. Proper Cold Holding temperature(41°F/ 45°F) See			✔				13. Proper use of restriction and exclusion; No discharge from eyes, nose, and mouth Employee health form posted	
		✔			3. Proper Hot Holding temperature(135°F)							**Preventing Contamination by Hands**	
		✔			4. Proper cooking time and temperature			✔				14. Hands cleaned and properly washed/ Gloves used properly	
		✔			5. Proper reheating procedure for hot holding (165°F in 2 Hours)			✔				15. No bare hand contact with ready to eat foods or approved alternate method properly followed (APPROVED Y_ N_) Gloves & utensils	
	✔				6. Time as a Public Health Control; procedures & records							**Highly Susceptible Populations**	
					Approved Source			✔				16. Pasteurized foods used; prohibited food not offered Pasteurized eggs used when required	
	✔				7. Food and ice obtained from approved source; Food in good condition, safe, and unadulterated; parasite destruction US Foods							**Chemicals**	
	✔				8. Food Received at proper temperature Checking					✔		17. Food additives; approved and properly stored; Washing Fruits & Vegetables N/a	
					Protection from Contamination			✔				18. Toxic substances properly identified, stored and used Stored low in basket separately	
	✔				9. Food Separated & protected, prevented during food preparation, storage, display, and tasting							**Water/ Plumbing**	
	✔				10. Food contact surfaces and Returnables ; Cleaned and Sanitized at 200 ppm/temperature			✔				19. Water from approved source; Plumbing installed; proper backflow device City approved	
	✔				11. Proper disposition of returned, previously served or reconditioned Discard			✔				20. Approved Sewage/Wastewater Disposal System, proper disposal	

Priority Foundation Items (2 Points) *violations Require Corrective Action within 10 days*

OUT	IN	NO	NA	COS	Demonstration of Knowledge/ Personnel	R	OUT	IN	NO	NA	COS	Food Temperature Control/ Identification	R
	✔				21. Person in charge present, demonstration of knowledge, and perform duties/ Certified Food Manager (CFM) 5			✔				27. Proper cooling method used; Equipment Adequate to Maintain Product Temperature	
	✔				22. Food Handler/ no unauthorized persons/ personnel 20			✔				28. Proper Date Marking and disposition Good date labels	
					Safe Water, Recordkeeping and Food Package Labeling			✔				29. Thermometers provided, accurate, and calibrated; Chemical/ Thermal test strips Digital thermo, strips current	
	✔				23. Hot and Cold Water available; adequate pressure, safe 136, good pressure							**Permit Requirement, Prerequisite for Operation**	
	✔				24. Required records available (shellstock tags; parasite destruction); Packaged Food labeled Commercial			✔				30. **Food Establishment Permit/Inspection** Current/ insp posted Posted and current	
					Conformance with Approved Procedures							**Utensils, Equipment, and Vending**	
	✔				25. Compliance with Variance, Specialized Process, and HACCP plan; Variance obtained for specialized processing methods; manufacturer instructions			✔				31. Adequate handwashing facilities: Accessible and properly supplied, used Equipped	
					Consumer Advisory			✔				32. Food and Non-food Contact surfaces cleanable, properly designed, constructed, and used	
	✔				26. Posting of Consumer Advisories; raw or under cooked foods (Disclosure/Reminder/Buffet Plate)/ Allergen Label Available upon request			✔				33. Warewashing Facilities; installed, maintained, used/ Service sink or curb cleaning facility provided Equipped	

Core Items (1 Point) *Violations Require Corrective Action Not to Exceed 90 Days or Next Inspection , Whichever Comes First*

OUT	IN	NO	NA	COS	Prevention of Food Contamination	R	OUT	IN	NO	NA	COS	Food Identification	R
	✔				34. No Evidence of Insect contamination, rodent/other animals			✔				41.Original container labeling (Bulk Food)	
	✔				35. Personal Cleanliness/eating, drinking or tobacco use Stored low							**Physical Facilities**	
	✔				36. Wiping Cloths; properly used and stored Stored in solution			✔				42. Non-Food Contact surfaces clean	
	✔				37. Environmental contamination			✔				43. Adequate ventilation and lighting; designated areas used	
	✔				38. Approved thawing method			✔				44. Garbage and Refuse properly disposed; facilities maintained	
					Proper Use of Utensils			✔				45. Physical facilities installed, maintained, and clean	
	✔				39. Utensils, equipment, & linens; properly used, stored, dried, & handled/ In use utensils; properly used			✔				46. Toilet Facilities; properly constructed, supplied, and clean Refer to cafe report	
	✔				40. Single-service & single-use articles; properly stored and used					✔		47. Other Violations N/a	

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City of Rockwall

Received by: (signature) Debbie Odom	**Print:** Debbie Odom	**Title: Person In Charge/ Owner** Employee
Inspected by: (signature) Richard Hill	**Print:** Richard Hill	**Business Email:**

Form EH-06 (Revised 09-2015)

Establishment Name:	Physical Address:	City/State:	License/Permit #	Page 2 of 2
Texas Health Hospital Coffee Bar	2091 Summer Lee Dr	Rockwall, Tx	FS-8810	

TEMPERATURE OBSERVATIONS

Item/Location	Temp	Item/Location	Temp	Item/Location	Temp
UC fridge					
Whole Milk	38				
Oat	40				
HWC	39				
Half&Half	39				

OBSERVATIONS AND CORRECTIVE ACTIONS

Item Number	AN INSPECTION OF YOUR ESTABLISHMENT HAS BEEN MADE. YOUR ATTENTION IS DIRECTED TO THE CONDITIONS OBSERVED AND NOTED BELOW: all temperatures are taken in F
	Restrooms refer to Cafe report
	Hand sink equipped greater than 104, plexiglass separation between hand sink and 3 comp
	3 comp sink set up, 136, quat sani 200ppm
	Digital thermo available, strips current 9/2027
	Sani bucket filled at coffee 3 comp
	Use sani towel to wipe wand between drinks on espresso machine
	Ice machine air gap confirmed
	Cabinets very clean and organized

Received by: (signature) See above	**Print:** See above	**Title: Person In Charge/ Owner**
Inspected by: (signature) RS	**Print:** Richard Hill,RS	Samples: Y N # collected

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