

Food Establishment Inspection Report

Score: 99.5

Establishment Name: SCHOOL
 CABARRUS CHARTER ACADEMY UPPER

Establishment ID: 02013110052

Location Address: 7550 RUBIN LINKER ROAD WEST

City: CONCORD State: NC

Zip: 28027 County: CABARRUS

Permittee: RED APPLE at CABARRUS UPPER, LLC

Telephone: _____

Wastewater System: Municipal/Community On-Site System

Water Supply: Municipal/Community On-Site Supply

Inspection Re-Inspection

Date: 04/26/2017 Status Code: A

Time In: 10:55 AM Time Out: 11:50 AM

Category#: 4

FDA Establishment Type: Public School Lunchrooms

No. of Risk Factor/Intervention Violations: 0

No. of Repeat Risk Factor/Intervention Violations: 0

Foodborne Illness Risk Factors and Public Health Interventions					
Risk factors: Contributing factors that increase the chance of developing foodborne illness.					
Public Health Interventions: Control measures to prevent foodborne illness or injury					
Compliance Status		OUT	CDI	R	VR
Supervision .2652					
1	<input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT <input type="checkbox"/> N/A				
PIC present. Demonstration - Certification by accredited program and perform duties		2	0		
Employee Health .2652					
2	<input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT				
Management, employees knowledge; responsibilities & reporting		3	1.5	0	
3	<input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT				
Proper use of reporting, restriction & exclusion		3	1.5	0	
Good Hygienic Practices .2652, 2653					
4	<input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT				
Proper eating, tasting, drinking, or tobacco use		2	1	0	
5	<input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT				
No discharge from eyes, nose, and mouth		1	0.5	0	
Preventing Contamination by Hands .2652, 2653, 2655, 2656					
6	<input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT				
Hands clean & properly washed		4	2	0	
7	<input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT <input type="checkbox"/> N/A <input type="checkbox"/> N/O				
No bare hand contact with RTE foods or a pre-approved alternate procedure properly allowed		3	1.5	0	
8	<input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT				
Handwashing sinks supplied & accessible		2	1	0	
Approved Source .2653, 2655					
9	<input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT				
Food obtained from approved source		2	1	0	
10	<input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT <input type="checkbox"/> N/A <input type="checkbox"/> N/O				
Food received at proper temperature		2	1	0	
11	<input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT				
Food in good condition, safe & unadulterated		2	1	0	
12	<input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT <input type="checkbox"/> N/A <input type="checkbox"/> N/O				
Required records available: shellstock tags, parasite destruction		2	1	0	
Protection from Contamination .2653, 2654					
13	<input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT <input type="checkbox"/> N/A <input type="checkbox"/> N/O				
Food separated & protected		3	1.5	0	
14	<input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT				
Food-contact surfaces: cleaned & sanitized		3	1.5	0	
15	<input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT				
Proper disposition of returned, previously served, reconditioned, & unsafe food		2	1	0	
Potentially Hazardous Food Time/Temperature .2653					
16	<input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT <input type="checkbox"/> N/A <input type="checkbox"/> N/O				
Proper cooking time & temperatures		3	1.5	0	
17	<input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT <input type="checkbox"/> N/A <input type="checkbox"/> N/O				
Proper reheating procedures for hot holding		3	1.5	0	
18	<input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT <input type="checkbox"/> N/A <input type="checkbox"/> N/O				
Proper cooling time & temperatures		3	1.5	0	
19	<input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT <input type="checkbox"/> N/A <input type="checkbox"/> N/O				
Proper hot holding temperatures		3	1.5	0	
20	<input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT <input type="checkbox"/> N/A <input type="checkbox"/> N/O				
Proper cold holding temperatures		3	1.5	0	
21	<input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT <input type="checkbox"/> N/A <input type="checkbox"/> N/O				
Proper date marking & disposition		3	1.5	0	
22	<input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT <input type="checkbox"/> N/A <input type="checkbox"/> N/O				
Time as a public health control: procedures & records		2	1	0	
Consumer Advisory .2653					
23	<input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT <input type="checkbox"/> N/A				
Consumer advisory provided for raw or undercooked foods		1	0.5	0	
Highly Susceptible Populations .2653					
24	<input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT <input type="checkbox"/> N/A				
Pasteurized foods used; prohibited foods not offered		3	1.5	0	
Chemical .2653, 2657					
25	<input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT <input type="checkbox"/> N/A				
Food additives: approved & properly used		1	0.5	0	
26	<input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT <input type="checkbox"/> N/A				
Toxic substances properly identified, stored, & used		2	1	0	
Conformance with Approved Procedures .2653, 2654, 2658					
27	<input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT <input type="checkbox"/> N/A				
Compliance with variance, specialized process, reduced oxygen packaging criteria or HACCP plan		2	1	0	

Good Retail Practices					
Good Retail Practices: Preventative measures to control the addition of pathogens, chemicals, and physical objects into foods.					
Compliance Status		OUT	CDI	R	VR
Safe Food and Water .2653, 2655, 2658					
28	<input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT <input type="checkbox"/> N/A				
Pasteurized eggs used where required		1	0.5	0	
29	<input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT				
Water and ice from approved source		2	1	0	
30	<input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT <input type="checkbox"/> N/A				
Variance obtained for specialized processing methods		1	0.5	0	
Food Temperature Control .2653, 2654					
31	<input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT				
Proper cooling methods used; adequate equipment for temperature control		1	0.5	0	
32	<input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT <input type="checkbox"/> N/A <input type="checkbox"/> N/O				
Plant food properly cooked for hot holding		1	0.5	0	
33	<input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT <input type="checkbox"/> N/A <input type="checkbox"/> N/O				
Approved thawing methods used		1	0.5	0	
34	<input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT				
Thermometers provided & accurate		1	0.5	0	
Food Identification .2653					
35	<input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT				
Food properly labeled; original container		2	1	0	
Prevention of Food Contamination .2652, 2653, 2654, 2656, 2657					
36	<input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT				
Insects & rodents not present; no unauthorized animals		2	1	0	
37	<input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT				
Contamination prevented during food preparation, storage & display		2	1	0	
38	<input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT				
Personal cleanliness		1	0.5	0	
39	<input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT				
Wiping cloths: properly used & stored		1	0.5	0	
40	<input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT <input type="checkbox"/> N/A				
Washing fruits & vegetables		1	0.5	0	X
Proper Use of Utensils .2653, 2654					
41	<input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT				
In-use utensils: properly stored		1	0.5	0	
42	<input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT				
Utensils, equipment & linens: properly stored, dried, & handled		1	0.5	0	
43	<input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT				
Single-use & single-service articles: properly stored & used		1	0.5	0	
44	<input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT				
Gloves used properly		1	0.5	0	
Utensils and Equipment .2653, 2654, 2653					
45	<input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT				
Equipment, food & non-food-contact surfaces approved, cleanable, properly designed, constructed & used		2	1	0	
46	<input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT				
Warewashing facilities: installed, maintained & used; test strips		1	0.5	0	
47	<input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT				
Non-food contact surfaces clean		1	0.5	0	
Physical Facilities .2654, 2655, 2656					
48	<input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT <input type="checkbox"/> N/A				
Hot & cold water available; adequate pressure		2	1	0	
49	<input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT				
Plumbing installed; proper backflow devices		2	1	0	
50	<input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT <input type="checkbox"/> N/A				
Sewage & waste water properly disposed		2	1	0	
51	<input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT				
Toilet facilities: properly constructed, supplied, & cleaned		1	0.5	0	
52	<input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT				
Garbage & refuse properly disposed; facilities maintained		1	0.5	0	
53	<input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT				
Physical facilities installed, maintained & clean		1	0.5	0	
54	<input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT				
Meets ventilation & lighting requirements; designated areas used		1	0.5	0	
TOTAL DEDUCTIONS:		0.5			

