



CALIFORNIA STATE UNIVERSITY, FULLERTON

Division of Administration & Finance

Capital Programs & Facilities Management, Environmental Health & Safety

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RETAIL FOOD FACILITY INSPECTION REPORT

| | | | | |
|--|----------------------------|--|----------------------------|-------------------------------|
| FACILITY NAME Starbucks - SGMH | | OPERATOR CSU Fullerton Auxiliary Services | | Permit No. 19-25 |
| FACILITY LOCATION 800 N. State College Blvd., SGMH Lobby, Fullerton, CA 92831 | | | | INSPECTOR Justine Baldacci |
| FOOD MANAGER / CERTIFICATE EXPIRATION DATE Joshua Roman-Carelli, 1/23/2021 | | PERSON IN CHARGE / TITLE Joshua Roman-Carelli / Manager | | |
| INSPECTION DATE 01/09/2020 | INSPECTION TYPE Routine | RE-INSPECTION Date 05/09/2020 | INSPECTION RESULTS Pass | |

Based on an inspection this day, the compliance status (IN, MAJ, MIN, OUT, N/A, N/O, COS) has been identified below. Violations noted as MAJ, MIN or OUT must be corrected. Failure to correct the listed violation(s) prior to the designated compliance date may necessitate a reinspection at an additional fee. See the following page(s) for the applicable code sections and the general requirements that correspond to the violation(s) noted below.

IN = In Compliance N/A = Not Applicable N/O = Not Observed MAJ = Major MIN = Minor OUT = Out of Compliance COS = Corrected on Site

Critical Risk Factors

| IN | MAJ | MIN | N/A | N/O | Violation | COS |
|--|-----|-----|-----|-----|--|-----|
| EMPLOYEE KNOWLEDGE | | | | | | |
| • | | | | | 1. Demonstration of knowledge, food safety certification | |
| EMPLOYEE HEALTH AND HYGENIC PRACTICES | | | | | | |
| • | | | | | 2. Communicable diseases: reporting, restrictions, and exclusions | |
| • | | | | | 3. No discharge from eyes, nose, or mouth | |
| • | | | | | 4. Proper eating, tasting, drinking or tobacco use | |
| CONTAMINATION BY HANDS | | | | | | |
| • | | | | | 5. Hands clean and properly washed, gloves used properly | |
| | | • | | | 6. Adequate hand washing facilities supplied and accessible. | • |
| TIME AND TEMPERATURE RELATIONSHIPS | | | | | | |
| • | | | | | 7A. Proper hot holding temperatures. | |
| • | | | | | 7B. Proper cold holding temperatures. | |
| • | | | | | 8. Times as a public health control; procedures and records | |
| | | | • | | 9. Proper cooling methods | |
| | | | • | | 10. Proper Cooking time and temperature | |
| | | | • | | 11. Proper reheating procedures for hot holding | |
| PROTECTION FROM CONTAMINATION | | | | | | |
| • | | | | | 12. Return and re-service of food | |
| • | | | | | 13. Food in good condition, safe, and unadulterated | |
| PROTECTION FROM CONTAMINATION | | | | | | |
| • | | | | | 14. Food contact surfaces clean and sanitized | |
| | | | • | | 14A. Sanitizer type is Chlorine | |
| • | | | | | 14B. Sanitizer type is Quaternary Ammonium | |
| | | | • | | 14C. Sanitizer type is Iodine | |
| • | | | | | 14D. Sanitizer type is Hot Water | |
| FOOD FROM APPROVED SOURCES | | | | | | |
| • | | | | | 15. Food Obtained from approved source | |
| | | | • | | 16. Compliance with shell stock tags, condition, display | |
| | | | • | | 17. Compliance with Gulf Oyster Regulations | |
| CONFORMANCE WITH APPROVED PROCEDURES | | | | | | |
| | | | • | | 18. Compliance with variance, specialized process and HACCP plan | |
| CONSUMER ADVISORY | | | | | | |
| | | | • | | 19. Consumer advisory provided for raw or undercooked foods | |
| | | | • | | 20. Licensed health care facilities/public and private schools: prohibited foods not offered | |
| WATER/HOT WATER | | | | | | |
| • | | | | | 21. Hot and cold water available | |
| • | | | | | 22. Sewage and wastewater properly disposed | |
| VERMIN | | | | | | |
| | | • | | | 23. No rodents, insects, birds, or animals | |

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Good Retail Practices

| OUT | Violation | COS | OUT | Violation | COS | OUT | Violation | COS |
|---|--|-----|--|-----------|-----|--|--|-----|
| SUPERVISION | | | EQUIPMENT/UTENSILS/LINENS | | | PHYSICAL FACILITIES | | |
| | 24. Person in charge present and performs duties | | • 33. Nonfood contact surfaces clean | | | | 43. Toilet facilities: properly constructed, supplied, cleaned | |
| | 25. Personal cleanliness and hair restraints | | 34. Ware washing facilities: installed, maintained, used, test strips | | | | 44. Premises, personal/cleaning items, vermin proofing | |
| GENERAL FOOD SAFETY REQUIREMENTS | | | PHYSICAL FACILITIES | | | PERMANENT FOOD FACILITIES | | |
| | 26. Approved thawing methods used, frozen food | | 35. Equipment/utensils approved, installed, clean, good repair, capacity | | | | 45. Floor, walls, and ceilings: built, maintained, and cleaned | |
| | 27. Food separated and protected | | 36. Equipment, utensils, and linens: storage and use | | | | 46. No unapproved private homes/living or sleeping quarters | |
| | 28. Washing fruits and vegetables | | 37. Vending Machines | | | SIGNS/REQUIREMENTS | | |
| | 29. Toxic substances properly identified, stored, used | | • 38. Adequate ventilation and lighting, designated areas, use | | | • 47. Signs posted, last inspection report available, placard posted | | |
| FOOD STORAGE/DISPLAY/SERVICE | | | 39. Thermometers provided and accurate | | | COMPLIANCE ENFORCEMENT | | |
| | 30. Food storage, food storage containers identified | | 40. Wiping cloths: properly used and stored | | | | 48. Plan review | |
| | 31. Consumer self-service | | PHYSICAL FACILITIES | | | | 49. Permits available | |
| | 32. Food properly labeled and honestly presented | | 41. Plumbing: proper backflow devices | | | | 50. Impoundment | |
| | | | 42. Garbage and refuse properly disposed of, facilities maintained | | | | 51. Permit Suspension | |

Opening Comments

6. Adequate hand washing facilities supplied and accessible.

Handwashing facilities must be provided, maintained with soap and single-use towels or drying device, and remain easily accessible. (113953, 113953.1, 113953.2, 114002.1)

Inspector Comments: Soap dispenser at front hand wash sink empty; soap was replaced during inspection. Ensure hand wash sinks are equipped with soap and paper towels.

23. No rodents, insects, birds, or animals

Each food facility shall be kept free of insects, birds, animals, or vermin (rodents (rats, mice), cockroaches, flies). (114259, 114259.1, 114259.4, 114259.5)

Inspector Comments: Small flying insects observed near floor drains in front service area. PIC believed insect activity was a result of plumbing issues, which will be addressed in near future. Resolve plumbing issues and take steps to eliminate insect activity.

33. Nonfood contact surfaces clean

All nonfood-contact surfaces of utensils and equipment shall be clean. (114115(c))

Inspector Comments: An accumulation of dirt and debris was observed on the floor in multiple locations under equipment. Remove accumulation and maintain clean.

Spills and/or plumbing leaks were observed in multiple locations in front service area. PIC believed these were due to plumbing issues. Resolve plumbing issues and maintain areas clean.

38. Adequate ventilation and lighting, designated areas, use

Adequate lighting and ventilation shall be provided. Exhaust hoods should be approved and maintained. (114149, 114149.1, 114149.2, 114149.3, 114252, 114252.1)

Inspector Comments: Light bulbs in rear refrigerators not functional. Repair or replace light bulbs.

47. Signs posted, last inspection report available, placard posted

Required signs and permits shall be posted in prominent locations; the last inspection report shall be maintained on site. (113725.1, 113945.1, 113953.5, 113978, 114075, 114276, 114381(e))

Inspector Comments: Post permit in a prominent location. A copy of the permit will be emailed to the PIC.

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It was agreed that a copy of this report will be sent to the email address on file. The person in charge was directed to call this office if the report is not received within two business days. Additional information can be found at www.ehs.fullerton.edu