



**SOUTHERN NEVADA HEALTH DISTRICT
FOOD ESTABLISHMENT INSPECTION**

280 SOUTH DECATUR BLVD • LAS VEGAS, NV • 89107 • 702-759-1258 (DIRECT PLAN REVIEW) • 702-759-1110 (DIRECT FOOD OPS) • 702-759-1000 (24 HOURS)

FACILITY INFORMATION

PERMIT #	ESTABLISHMENT NAME	PHONE #	EST. SQUARE FOOTAGE	PRIMARY EHS							
PR0001470	Orr, William E Jr Hi School Orr, William E Jr High School Kitchen	(702) 799-5573	800	EE7001061							
ADDRESS	RISK CAT.	P.E. CODE	DISTRICT	LOCATION	PERMIT STATUS						
1562 E Katie AVE Las Vegas, NV 89119-5622	2	1104	52		ACTIVE						
NEVADA CLEAN INDOOR AIR ACT: <input checked="" type="checkbox"/> COMPLIANCE REQUIRED <input type="checkbox"/> EXEMPT			CONTACT PERSON: Daniel Sisneroz								
CURRENT SERVICE	EHS	SERVICE	DATE	TIME IN	TIME OUT	DEMERITS	FINAL GRADE	TRAVEL MIN	INSPECTION RESULT	SEWER	WATER
	EE7001061	Routine Inspection	3/11/2019	1:30PM	2:45PM	0	Closed	0	Closed with Fees	M	M

SPECIAL NOTES:
In = In compliance **OUT** = Not in compliance **COS** = Corrected on-site during inspection **N/O** = Not observed **N/A** = Not applicable **R** = Repeat violation

Imminent Health Hazards-Notify SNHD and Cease Operations as Directed **OUT**

A	Interruption of electrical service	<input type="checkbox"/>				
B	No potable water or hot water	<input type="checkbox"/>				
C	Gross unsanitary occurrences or conditions including pest infestation	<input checked="" type="checkbox"/>				
D	Sewage or liquid waste not disposed of in an approved manner	<input type="checkbox"/>				
E	Lack of adequate refrigeration	<input type="checkbox"/>				
F	Lack of adequate employee toilets and handwashing facilities	<input type="checkbox"/>				
G	Misuse of poisonous or toxic materials	<input type="checkbox"/>				
H	Suspected foodborne illness outbreak	<input type="checkbox"/>				
I	Emergency such as fire and/or flood	<input type="checkbox"/>				
J	Other condition or circumstance that may endanger public health	<input type="checkbox"/>				

SECTION 1 - The Critical Violations listed below are to be assessed 5 demerits for each violation **IN** **OUT** **COS** **NO** **NA** **R**

1	Verifiable time as a control with approved procedure when in use. Operational plan, waiver or variance approved and followed when required. Operating within the parameters of the health permit.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2	Handwashing (as required, when required, proper glove use, no bare hand contact of ready to eat foods). Foodhandler health restrictions as required.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3	Commercially manufactured food from approved source with required labels. Parasite destruction as required. Potentially hazardous foods/time temperature control for safety (PHF/TCS) received at proper temperature.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4	Hot and cold running water from approved source as required.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5	Imminently dangerous cross connection or backflow. Waste water and sewage disposed into public sewer or approved facility.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6	Food wholesome; not spoiled, contaminated, or adulterated.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7	PHF/TCSs cooked and reheated to proper temperatures.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8	PHF/TCSs properly cooled.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
9	PHF/TCSs at proper temperatures during storage, display, service, transport, and holding.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

SECTION 2 - The Major Violations listed below are to be assessed 3 demerits for each violation **IN** **OUT** **COS** **NO** **NA** **R**

10	Food and warewashing equipment approved, properly designed, constructed and installed.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
11	Food protected from potential contamination during storage and preparation.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
12	Food protected from potential contamination by chemicals. Toxic items properly labeled, stored and used.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
13	Food protected from potential contamination by employees and consumers.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
14	Kitchenware and food contact surfaces of equipment properly washed, rinsed, sanitized and air dried. Equipment for warewashing operated and maintained. Sanitizer solution provided and maintained as required.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
15	Handwashing facilities adequate in number, stocked, accessible, and limited to handwashing only.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
16	Effective pest control measures. Animals restricted as required.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
17	Hot and cold holding equipment present; properly designed, maintained and operated.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
18	Accurate thermometers (stem & hot/cold holding) provided and used.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
19	PHF/TCSs properly thawed. Fruits and vegetables washed prior to preparation or service.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
20	Single use items not reused or misused.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
21	Person in charge available and knowledgeable/management certification. Foodhandler card as required. Facility has an effective employee health policy.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
22	Backflow prevention devices and methods in place and maintained.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>



23	Grade card and required signs posted conspicuously. Consumer advisory as required. Records/logs maintained and available when required. NCIAA compliant. PHFs labeled and dated as required. Food sold for offsite consumption labeled properly.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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SECTION 3 - Good Food Management Practices to Prevent Unsanitary Conditions

		IN	OUT	NA			
24	Acceptable personal hygiene practices, clean outer garments, proper hair restraints used. Living quarters and child care completely separated from food service.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
25	Non-PHF and food storage containers properly labeled and dated as required. Food stored off the floor when required. Non-PHF/TCS not spoiled and within shelf-life. Proper retail storage of chemicals.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
26	Facilities for washing and sanitizing kitchenware approved, adequate, properly constructed, maintained and operated.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
27	Appropriate sanitizer test kits provided and used. Equipment and ware washing thermometer(s) are required. Wiping cloths and linens stored and used properly.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
28	Small wares and portable appliances approved, properly designed, in good repair.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
29	Utensils, equipment, and single serve items properly handled, stored, and dispensed.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
30	Nonfood contact surfaces and equipment properly constructed, installed, maintained and clean.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
31	Restrooms, mop sink, and custodial areas maintained and clean. Premises maintained free of litter, unnecessary equipment, or personal effects. Trash areas adequate, pest proof, and clean.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
32	Facility in sound condition and maintained (floors, walls, ceilings, plumbing, lighting, ventilation, etc.).	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

TEMPERATURE OBSERVATIONS

CT = Cooking temp. HH = Hot Holding temp. CH = Cold Holding temp. RH = ReHeat temp. TC = Time as Control temp. COOL = Cooling temp.

Item	Location	Measurement	Comment
DELI WRAP		41.00 F	CH
BEAN		197.00 F	HH
CHICKEN NUGGETS		152.00 F	HH

VIOLATIONS, OBSERVATIONS AND CORRECTIVE ACTIONS

Item No	Observations & Corrective Actions
C	<p>Violation: Pests observed in facility.</p> <p>Inspector Observation: INSPECTOR OBSERVED LIVE AND DEAD ROACHES THROUGHOUT FACILITY. OBSERVED LIVE ROACHES IN THE KITCHEN AND CRAWLING ON THE WALLS ABOVE BOXES OF APPLES AS WELL AS ON THE WALL BELOW WHERE STAFF SERVES THE STUDENTS THEIR FOOD. GLUE TRAPS THAT WERE PLACED BY CCSD PEST CONTROL ON 3/7/19 WERE FULL OF ROACHES. INSPECTOR ALSO OBSERVED A DEAD ROACH ON THE THREE COMPARTMENT SINK WHERE STAFF WAS ACTIVELY WARE WASHING DISHES AT THE TIME.</p> <p>Corrective Action: All food activities must remain suspended until corrective action has been taken to eliminate/correct the hazard. A fee of \$716 must be paid prior to scheduling the re-inspection during normal business hours (Mon-Fri 8a-4:30p excluding holidays). SEE NOTE IN COMMENTS FOR FOOD MENU ALLOWANCE. Institute effective pest control measures to prevent the entry of pests and eliminate the presence of any observed pest activity. (6-202.13; 6-202.15; 6-501)</p>

Overall Inspection Comments:

SCHOOL KITCHEN IS CLOSED AT THIS TIME DUE TO COCK ROACH INFESTATION OF MULTI-GENERATIONAL GERMAN COCKROACHES . FACILITY TO NOT SERVE ANY OPEN FOODS; ONLY LIMITED MENU OF PREPARED AND PREPACKAGED FOODS FROM THE CCSD COMMISSARY ARE TO BE DELIVERED AND SERVED. FACILITY WILL BE ON THIS LIMITED ITEM LUNCH MENU UNTIL THE INFESTATION HAS BEEN PROPERLY TREATED AND CONTROL OF PESTS HAVE BEEN MITIGATED AND INSPECTOR VERIFIES THAT SUCH ISSUE HAS BEEN MANAGED AND CONTROLLED. ONCE FEE OF \$716.00 HAS BEEN PAID AND PEST ISSUE HAS BEEN MANAGED AND CONTROLLED, THAN CONTACT INSPECTOR FOR REINSPECTION OF KITCHEN.

SEE CONCURRENT SCHOOL REPORT FOR FINDINGS AND TIME LINE OF CORRECTIVE ACTION TO TAKE PLACE; WORK CLOSELY WITH CCSD SCHOOL AND PEST CONTROL.



DANIEL SISNEROZ
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Food establishment regulations (2010) and educational materials available at www.SouthernNevadaHealthDistrict.org/ferl

Section 1 Demerits	0	<p>0 to 10 demerits = A (Identical consecutive critical or major violations shall be downgraded to next lower grade.)</p> <p>11 to 20 demerits or identical consecutive critical or major violation = B; Re-inspection after 15 days, or sooner if requested. Inspection must result in 10 demerits or less, with no identical repeat critical or major violations. Failure on re-inspection will result in a "C" grade with associated fee and may require a supervisory conference.</p> <p>21 to 40 demerits = C; Re-inspection after 15 days, or sooner if requested. Inspection must result in 10 demerits or less, with no identical repeat critical or major violations. Failure on re-inspection will result in a closure of the facility with associated fee and may require a supervisory conference.</p> <p>41 or more demerits = Closure or Imminent Health Hazard requiring closure; All food activities must remain suspended until approved by Health Authority. Re-inspection upon operator request must result in 10 demerits or less, with no identical repeat critical or major violations. Failure on re-inspection will result in continued closed status with associated fee and may require a supervisory conference.</p>
Section 2 Demerits	0	
Total Demerits	0	
Initial Inspection Grade	Closed	
<input type="checkbox"/> This grade resulted from a repeat critical or major violation.		
Reinspection Fee:	\$716.00	

Fee required to be paid within 10 business days or prior to reinspection
Inspector name: Virginia Whitesides

Received by (signature)	Received by (printed)	EHS (signature)
	DANIEL SISNEROZ FOOD SVC MGR II	 Virginia Whitesides

Your signature on this form: 1) Does not constitute agreement with its contents. You may discuss the contents of this report with the department by contacting the supervisor at the Environmental Health office indicated on page one of this report. Until such time as a decision is rendered by this department, the contents of this report shall remain in effect; and 2) Acknowledges that this inspection report will be distributed by either email, fax, or postal delivery (of your choosing) within 1 business day. 5104 V18

HOW TO SPOT A FAKE RESTAURANT INSPECTOR

Does your health inspector wear an identification badge? Do they have official business cards?

An Environmental Health Specialist (aka "health inspector") with the Southern Nevada Health District wears a picture ID badge. Health District inspectors will identify themselves, state the purpose of their visit, and ask to speak to a Person-In-Charge (PIC). They usually carry official business cards.

Did you receive a phone call to schedule a routine inspection?

Routine inspections are UNANNOUNCED. Scheduled inspections are usually follow-up activities such as re-inspections and surveys. If you are currently in the Plan Review process, our Facility Design Assessment & Permitting (FDAP) inspectors may schedule an on-site inspection.

Did they ask for any personal information including credit card information?

Health District inspectors will NOT ask for credit card information. Personal information requests are limited to a name, email address, and phone number. Email addresses are needed to send inspection reports, and phone numbers are primarily used to contact the PIC of a facility in case of an emergency or to request information.

Did they ask you for money or food?

Health inspectors will NOT ask for money; no financial transactions can be handled by a health inspector. Routine inspections do not have an associated fee. Annual health permit fees, re-inspection fees, verified complaint fees, and closure fees are remitted directly to the Health District, either online or in person, at any of the Health District's Environmental Health service locations. A health inspector can give you information about paying fees online or about locations where payments can be made. Health inspectors will not ask for or accept food.

Did they provide an inspection report?

A health inspection (including follow-up visits) will be documented on an inspection report and be sent to the PIC (or designated recipient) via email, fax, or paper form within 24 hours. If a routine inspection was conducted, an inspector will provide a grade card before leaving.



If you are still in doubt, you can call the Southern Nevada Health District to verify information.

Monday-Friday 8:00 a.m. – 4:30 p.m.
(702) 759-1110

NOTE: Health inspectors from the Southern Nevada Health District may conduct inspections outside of normal Health District business hours.

