



County of Kings - Department of Public Health

Environmental Health Services Division

330 Campus Drive Hanford, CA 93230

Phone - 559-584-1411 Fax - 559-584-6040

Internet - www.countyofkings.com/ehs

FOOD SAFETY EVALUATION REPORT

| | | | |
|---|---|---------------------------------|---|
| FACILITY NAME: CHURCH OF THE SAVIOUR-SOUP KITCHEN | BUSINESS PHONE: (559) 584-7706 | RECORD ID#: PR0000539 | DATE: July 13, 2021 |
| FACILITY SITE ADDRESS: 519 N DOUTY ST | CITY: HANFORD | ZIP CODE: 93230 | INSPECTION TYPE: ROUTINE INSPECTION |
| OWNER NAME: CHURCH OF THE SAVIOUR | CERTIFIED FOOD MANAGER: STEVEN NOEL | EXP DATE: 5/16/2022 | INSPECTOR: Liliana Stransky - REHS |

The items (if any) listed below identify the violation(s) that must be corrected. Thank you for your cooperation.
One reinspection will be conducted (if needed) at no charge. A service fee is assessed for each additional reinspection required.

Violation: IMPROPER COLD HOLDING TEMPERATURE(S) [HSC 113996]

Description/Corrective Action: The refrigerator used to store baked goods was observed at 51F. This unit cannot be used to store potentially hazardous foods until it's able to hold at or below 41F.

The refrigerator in the back storage room was observed at 48F. This unit cannot be used to store potentially hazardous foods until it can hold temperature at or below 41F.

Violation: FOODS & EQUIPMENT NOT PROTECTED FROM CONTAMINATION [HSC 113980, 114025-114027]

Description/Corrective Action: Store all foods in proper containers and do not stack them on top of each other if these don't have proper lids to protect the food. Observed open deli plastic containers sitting above other open containers. Please discontinue this practice to prevent cross contamination.

Inside the walk-in freezer, separate raw foods by category to reduce the risk of cross contamination. At the very top, store ready to eat foods such as breads, fruits and vegetables. Below these items store eggs and fish, then red meats and pork and at the lowest shelf store the packages of raw chicken.

Keep refrigeration units organized and rotate food items using the first-in, first-out principle.

Violation: IMPROPER MAINTENANCE OF HANDWASH FACILITIES [HSC 113953 - 113593.2]

Description/Corrective Action: All hand washing stations need to have hand soap (pump soap is ok) and paper towels. Please replace missing items for the stations observed.

Violation: SPOILED OR ADULTERATED FOOD PRODUCTS DISPLAYED [HSC 113980 & 114055]

Description/Corrective Action: Remove all products that are expired or spoiled from the food inventory in the storage rooms out back. Observed cartons of expired milk from one of the refrigerators and overly dented cans in one of the dry storage rooms.

General Comments:

NOTE: This report must be made available to the public on request



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| FACILITY NAME: CHURCH OF THE SAVIOUR-SOUP KITCHEN | BUSINESS PHONE: (559) 584-7706 | RECORD ID#: PR0000539 | DATE: July 13, 2021 |
| FACILITY SITE ADDRESS: 519 N DOUTY ST | CITY: HANFORD | ZIP CODE: 93230 | INSPECTION TYPE: ROUTINE INSPECTION |
| OWNER NAME: CHURCH OF THE SAVIOUR | CERTIFIED FOOD MANAGER: STEVEN NOEL | EXP DATE: 5/16/2022 | INSPECTOR: Liliana Stransky - REHS |

The items (if any) listed below identify the violation(s) that must be corrected. Thank you for your cooperation.
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ROUTINE INSPECTION -

Observed chlorine sanitizing level at 100ppm for the final rinse cycle in the dishwasher.

Restroom facilities were noted clean and soap and paper towels were available.

The soup kitchen is currently serving only pre-packaged foods in bagged lunches. Besides preparing sandwiches, no actual cooking is happening and no dining services are offered until further notice.

Better organization is needed in the food storage areas. Pay close attention to all donated food items and discard or reject any dairy product that is expired or spoiled as noted above. Please address the deficiencies that were noted on the report in a timely manner.

Thank you for your attention.

RESULTS OF EVALUATION: PASS NEEDS IMPROVEMENT FAIL

Reinspection Required: Yes: No:

Reinspection Date (on or after): N/A

Potential Food Safety All Star:

Received By:

Liliana Stransky - REHS

Agency Representative

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OFFICIAL INSPECTION REPORT

| | | | |
|---|--|---------------------------------|---|
| FACILITY NAME: CHURCH OF THE SAVIOUR-SOUP KITCHEN | BUSINESS PHONE: (559) 584-7706 | RECORD ID#: PR0000539 | DATE: March 25, 2020 |
| FACILITY SITE ADDRESS: 519 N DOUTY ST | CITY: HANFORD | ZIP CODE: 93230 | INSPECTION TYPE: PUBLIC INFORMATION/EDUCATIOI |
| OWNER NAME: CHURCH OF THE SAVIOUR | Program Description: 1107 - KINGS DPH COVID-19 | EXP DATE: 5/16/2022 | INSPECTOR: Yatee Patel - REHS |

The items (if any) listed below identify the Health Code violation(s) that must be corrected. Thank you for your cooperation.
One reinspection will be conducted (if needed) at no charge. A service fee is assessed for each additional reinspection required.

Violation: None Noted

General Comments:

The facility has made their dinning completely inaccessible to customers and is encouraging customers to wait outside.

At this time all food are PICK-UP ONLY!!

The staff is aware of social distancing by requesting that customers keep apart a minimum of six feet from each other and staff.

Staff is practicing safe food handling procedures to protect food from contamination, monitor hot & cold holding temperatures, and WASH HANDS.

Staff uses sanitizing solution (chlorine 100ppm or QAC 200ppm) for wiping down all counters and work surfaces to reduce the risk of contamination. All work surfaces should be cleaned and sanitized frequently to prevent contamination.

Under no circumstances are volunteers who feel sick or are sick with respiratory (i.e. fever, coughing or sneezing) or gastrointestinal (i.e. vomiting or diarrhea) symptoms are allowed to work in the facility.

An investigation was conducted today to review and verify the above food and employee safety practices are being followed. The report will be emailed to the owner/operator.

Please contact our Department for further questions.

Reinspection Required: Yes: No: **Reinspection Date (on or after):** Not Specified

Yatee Patel - REHS

Environmental Health Specialist

Received By: _____