

Food Establishment Inspection Report



Wichita Falls - Wichita County
Public Health District
1700 Third Street
Wichita Falls, TX 76301
940-761-7800

SITE NO.	INV NO.	IR NO.	DATE	INSPECTION TIME	INSPECTOR
6361	1		10/11/2011		Railsback, Brian

SITE INFORMATION	INVENTORY/MANAGER	SERVICE TYPE/FREQUENCY
MCDONALDS 1423 SOUTHWEST PKWY WICHITA FALLS TX 76302 940-766-2366	Process 2	Inspection- Regular Inspected 3 Times per Year

Scheduled calendar inspections.

Violations: Critical - 2 Score: 94

CRITICAL VIOLATIONS SUMMARY

<u>CODE</u>	<u>DESCRIPTION</u>	<u>POINTS</u>	<u>CORRECTED</u>
16	Handwash Facilities Adequate & Access	3	_____
17	Handwash Facilities with Soap & Towels	3	_____

CRITICAL VIOLATIONS DETAIL

<u>CODE</u>	<u>DESCRIPTION</u>
16	Texas Food Establishment Rules Page 107 §229.166 (h) Plumbing, location and placement. (1) Handwashing facilities. A handwashing facility shall be located: (A) to allow convenient use by employees in food preparation, food dispensing, and warewashing areas; and (B) in, or immediately adjacent to, toilet rooms. To Wit: Must repair handwash sink and install splash guard, water temp must be at least 100 degrees
17	Page 122 §229.167 (e) Handwashing facilities. (1) Minimum number. Handwashing facilities shall be provided as specified under §229.166(g)(1) of this title. (2) Handwashing cleanser, availability. Each handwashing lavatory or group of 2

CODE**DESCRIPTION**

adjacent lavatories shall be provided with a supply of hand cleaning liquid, powder, or bar soap.

(3) Hand drying provision. Each handwashing lavatory or group of adjacent lavatories shall be provided with:

(A) individual, disposable towels;

(B) a continuous towel system that supplies the user with a clean towel; or

(C) a heated-air hand drying device.

To Wit: No hand drying provisions were available at the handwash facilities in the dishwash machine area.

To Correct: Hand drying provisions must be available at the handwash facilities in the dishwash machine area. Corrections must be made immediately.

I HEREBY, ACKNOWLEDGE THE ISSUANCE AND RECEIPT OF THIS OFFICIAL Food Establishment Inspection Report.

Brian Railsback, Public Health Officer

OWNER / MANAGER SIGNATURE

OWNER / MANAGER PRINT NAME