

Food Program Official Inspection Report

Siskiyou County Community Development Department Environmental Health Division 806 S. Main Street Yreka, California 96097 phone: (530) 841-2100, fax: (530) 841-4076

Facilit	/ Na	^{me:} Hospice S	Senio	r Se	rvice		Permit # 000263						
Addre	SS:	810 N Oregon	St	Yreł	ka. C	A 96097							
Permit Holder: Permit To Operate:													
Madrone Hospice Valid Valid Not Valid													
	Phone: 530-841-5365 E-mail: sara@madronehospice.org												
Food Safety Certified Employee: Jessica Avery 2/2027							Expiration Date: 2/2027						
				OUT		The marked items represent Health Code violations ar							
Protection Time/ Temp.	1	Food Temp.											
	2	Prep./ Service		Х		ROUTINE INSPECTION CONDUCTE	D THIS DATE						
	3	Storage/ Disp.											
	4	Frozen Food				2) Observed salsa cooling and covered at 55F in the 3-door-r	3-door-reach-in refrigerator.						
	5	Pure Food				Practice the following rapid cooling procedures: place							
	6	Reused Food				into smaller/thinner portion, using rapid cooling devices like ice paddles, using i							
P	7	Transportation				ingredient, inserting containers in an ice bath and stir refrigerator to cool can be loosely covered or uncover							
0)	8	Storage Fac.				contamination during the cooling period to assist in he							
rag	9	Refrig. Units				food and stirred as necessary to evenly cool food. Correct immediately.							
Food Storage	10	Thermometer											
poo	11	Hazardous Mat.											
ш	12	Spoils											
ip.	13	Wash/ Sanitize											
Uten./Equip.	14	Equip. Condition											
ten./	15	Utensil Condition				1							
Ę	16	Storage											
e	17	Handwashing											
loye	18	Employee Hygiene											
Employee	19	Employee Habits											
	20	Food Cert./ Card											
Water		Water				4							
		Cross Con.											
Waste	-	Liquid Waste											
	-	Refuse				4							
Vermin	-	Rodents/ Insects											
Ve		Animal/ Fowl	_										
	-	Ventilation											
es		Doors											
Facilities	-	Floors											
Ц		Walls - Ceilings											
	31	Toilet Fac.				4							
	32					4							
		Lighting											
Misc.		Clothing - Linen											
		Signs	\vdash										
MA I -		Misc. or violation	<u> </u>		of cor	pliance COS = Corrected on-site							
		y (Print):		Juil	51 0011	Received by (Signature):	Date:						
Samantha Lukensmeyer 03/27/2024													
REHS	(Print	t): Chelun Davi	o) /			REHS (Signature):	Phone:						
		Chalyn Dew	еу				530-841-2112						

Facility Name:	Hospice Senior Service	
	The marked items represent Health Code violations and must be corrected as follo	DWS:
	ι,	
Received By (Print):	Received by (Signature):	Date:
Sa	amantha Lukensmeyer	03/27/2024
REHS (Print):	REHS (Signature):	Phone:
Chalyn E	Jewey	530-841-2112

Facility Name:	Hospice Senior Service	
	The marked items represent Health Code violations and mu	ist be corrected as follows:
	ζ.	
		D-14
Received By (Print): Sam	Received by (Signature): antha Lukensmeyer	Date: 03/27/2024
REHS (Print):	REHS (Signature):	Phone:
Chalyn I	Dewey	530-841-2112
Page 3		

Facility Name:	Hospice Senior Service	
	The marked items represent Health Code violations and must be corrected as follows	S:
	· · · · · · · · · · · · · · · · · · ·	
	,	
Received By (Print):	Received by (Signature):	Date:
	nantha Lukensmeyer	03/27/2024
REHS (Print):		Phone:
Chalyn [Dewey	530-841-2112