

Food Establishment Inspection Report

Local Health Department Name and Address Woodford County Health Department 1831 S. Main Street, Eureka, IL 61530		No. of Risk Factor/Intervention Violations	0	Date	10/11/2018
Establishment Fieldcrest Elementary South School cafeteria		License/Permit #	18 030	No. of Repeat Risk Factor/Intervention Violations	0
Street Address 523 Johnson Street		Permit Holder	Fieldcrest CUSD #6	Risk Category	I
City/State Minonk, IL		ZIP Code	61760	Purpose of Inspection Routine Inspection	
				Time In	10:35 AM
				Time Out	12:20 PM

FOODBORNE ILLNESS RISK FACTORS AND PUBLIC HEALTH INTERVENTIONS

Circle designated compliance status (IN, OUT, N/O, N/A) for each numbered item
IN=in compliance **OUT**=not in compliance **N/O**=not observed **N/A**=not applicable
 Mark "X" in appropriate box for COS and/or R
COS=corrected on-site during inspection **R**=repeat violation

Risk factors are important practices or procedures identified as the most prevalent contributing factors of foodborne illness or injury. Public health interventions are control measures to prevent foodborne illness or injury.

Compliance Status		COS	R	Compliance Status		COS	R
Supervision				Protection from Contamination			
1	In			15	In		
Person in charge present, demonstrates knowledge, and performs duties				Food separated and protected			
2	In			16	In		
Certified Food Protection Manager (CFPM)				Food-contact surfaces; cleaned and sanitized			
Employee Health				17	In		
3	In			Proper disposition of returned, previously served, reconditioned and unsafe food			
Management, food employee and conditional employee; knowledge, responsibilities and reporting				Time/Temperature Control for Safety			
4	In			18	In		
Proper use of restriction and exclusion				Proper cooking time and temperatures			
5	In			19	N/O		
Procedures for responding to vomiting and diarrheal events				Proper reheating procedures for hot holding			
Good Hygienic Practices				20	N/O		
6	In			Proper cooling time and temperature			
Proper eating, tasting, drinking, or tobacco use				21	In		
7	In			Proper hot holding temperatures			
No discharge from eyes, nose, and mouth				22	In		
Preventing Contamination by Hands				Proper cold holding temperatures			
8	In			23	In		
Hands clean and properly washed				Proper date marking and disposition			
9	In			24	N/A		
No bare hand contact with RTE food or a pre-approved alternative procedure properly allowed				Time as a Public Health Control; procedures & records			
10	In			Consumer Advisory			
Adequate handwashing sinks properly supplied and accessible				25	N/A		
Approved Source				Consumer advisory provided for raw/undercooked food			
11	In			Highly Susceptible Populations			
Food obtained from approved source				26	In		
12	N/O			Pasteurized foods used; prohibited foods not offered			
Food received at proper temperature				Food/Color Additives and Toxic Substances			
13	In			27	In		
Food in good condition, safe, and unadulterated				Food additives: approved and properly used			
14	N/A			28	In		
Required records available: shellstock tags, parasite destruction				Toxic substances properly identified, stored, and used			
GOOD RETAIL PRACTICES				Conformance with Approved Procedures			
				29	N/A		
				Compliance with variance/specialized process/HACCP			

GOOD RETAIL PRACTICES

Good Retail Practices are preventative measures to control the addition of pathogens, chemicals, and physical objects into foods.

Mark "X" in box if numbered item is not in compliance Mark "X" in appropriate box for COS and/or R **COS**=corrected on-site during inspection **R**=repeat violation

		COS	R			COS	R
Safe Food and Water				Proper Use of Utensils			
30	Pasteurized eggs used where required			43	In-use utensils: properly stored		
31	Water and ice from approved source			44	Utensils, equipment & linens: properly stored, dried, & handled		
32	Variance obtained for specialized processing methods			45	Single-use/single-service articles: properly stored and used		
Food Temperature Control				46	Gloves used properly		
33	Proper cooling methods used; adequate equipment for temperature control			Utensils, Equipment and Vending			
34	Plant food properly cooked for hot holding			47	Food and non-food contact surfaces cleanable, properly designed, constructed, and used		
35	Approved thawing methods used			48	Warewashing facilities: installed, maintained, & used; test strips		
36	Thermometers provided & accurate			49	Non-food contact surfaces clean		
Food Identification				Physical Facilities			
37	Food properly labeled; original container			50	Hot and cold water available; adequate pressure		
Prevention of Food Contamination				51	Plumbing installed; proper backflow devices		
38	Insects, rodents, and animals not present			52	Sewage and waste water properly disposed		
39	Contamination prevented during food preparation, storage and display			53	Toilet facilities: properly constructed, supplied, & cleaned		
40	Personal cleanliness			54	Garbage & refuse properly disposed; facilities maintained		
41	Wiping cloths: properly used and stored			55	X Physical facilities installed, maintained, and clean		
42	Washing fruits and vegetables			56	Adequate ventilation and lighting; designated areas used		
Employee Training				Employee Training			
				57	All food employees have food handler training		
				58	Allergen training as required		

Food Establishment Inspection Report

Establishment: Fieldcrest Elementary South School cafeteria Establishment #: 18 030

Water Supply: Public Private Waste Water System: Public Private

Sanitizer Type: Chlorine PPM: 50/200 Heat: N/A

TEMPERATURE OBSERVATIONS					
Item/Location	Temp		Item/Location	Temp	
Hot dogs/oven	168		Sliced cheese/RIC	41	Milk cooler/gym storage room
Baked beans/steam table	196		Ham/RIC storage room	38	Milk cooler/gym storage room
			Chef salad/RIC	40	Chest RIF/storage room
					Upright RIF/storage room
					RIC/storage room
					RIF/storage room
					Chest RIF/storage room
					RIF/kitchen
					RIC/kitchen

OBSERVATIONS AND CORRECTIVE ACTIONS

Item Number	Violations cited in this report must be corrected within the time frames below.
55	6-201.11 (C) Observed in gym storage room (milk coolers, service sink) two (2) holes in concrete block wall above capped wastewater pipe and concrete block wall not maintained in good repair. Please correct this violation within 90 days or at least by next routine inspection.

CFPM Verification (name, expiration date, ID#): Amy Rossman			
Amy Rossman 14756528 - ServSafe Exp. 2/2022	Amanda Whited 01634481 - IL FSSMC Exp. 3/2019	Scott Oncken 21366473 - NRFSP Exp. 7/2022	
HACCP Topic: TCS food cooking temperatures, employee health requirements			

Amy Rossman Person in Charge (Signature)
 Oct 11, 2018 Date

Paul [Signature] Inspector (Signature)
 Follow-up: Yes No (Check one)
Follow-up Date: _____

