Food Establishment Inspection Report

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Local Health Department Name and Address	No. of Risk Factor/Intervention Violations		0	Date	04/11/2019			
Logan County Department of Public Health 109 3rd St, P.O. Box 508, Lincoln, IL 62656 Phone: (2)	Tion of hisk ractory intervention violations			Time In	1:30pm			
, , ,	License/Pe		No. of Repeat Risk Factor/Intervention Violations			Time Out	2:30pm	
American Legion Post #263 210			Permit Holder Risk Cate		· .	•		
Street Address			American Legion Post #263 Mediu			m/Class II		
1740 Fifth St.	Purpose of Inspection							
City/State ZIP Code			Routine Inspection					
Lincoln, IL								

FOODBORNE ILLNESS RISK FACTORS AND PUBLIC HEALTH INTERVENTIONS

Circle designated compliance status (IN, OUT, N/O, N/A) for each numbered item

N=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.

	CO3-	-corrected on-site during inspection - N-repeat violatio	<u>''</u>	
Со	mpliance Status		cos	R
-,		Supervision		
1	In	Person in charge present, demonstrates knowledge, and performs duties		
2	In	Certified Food Protection Manager (CFPM)		
		Employee Health		
3	In	Management, food employee and conditional employee; knowledge, responsibilities and reporting		
4	In	Proper use of restriction and exclusion		
5	In	Procedures for responding to vomiting and diarrheal events		
		Good Hygienic Practices		
6	In	Proper eating, tasting, drinking, or tobacco use		
7	In	No discharge from eyes, nose, and mouth		
		Preventing Contamination by Hands		
8	In	Hands clean and properly washed		
9	In	No bare hand contact with RTE food or a pre-approved alternative procedure properly allowed		
10	In	Adequate handwashing sinks properly supplied and accessible		
		Approved Source		
11	In	Food obtained from approved source		
12	N/O	Food received at proper temperature		
13	In	Food in good condition, safe, and unadulterated		
14	N/A	Required records available: shellstock tags, parasite destruction		
		COOD	DET	- 1

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Co	mpliance Status		cos	R				
		Protection from Contamination						
15	In	Food separated and protected						
16	In	Food-contact surfaces; cleaned and sanitized						
17	In	Proper disposition of returned, previously served, reconditioned and unsafe food						
	Ţ	ime/Temperature Control for Safety						
18	N/O	Proper cooking time and temperatures						
19	N/A	Proper reheating procedures for hot holding						
20	N/A	Proper cooling time and temperature						
21	N/O	Proper hot holding temperatures						
22	In	Proper cold holding temperatures						
23	In	Proper date marking and disposition						
24	N/A	Time as a Public Health Control; procedures & records						
		Consumer Advisory						
25	N/A	Consumer advisory provided for raw/undercooked food						
		Highly Susceptible Populations						
26	N/A	Pasteurized foods used; prohibited foods not offered						
	Foo	d/Color Additives and Toxic Substances						
27	In	Food additives: approved and properly used						
28	In	Toxic substances properly identified, stored, and used						
	Co	nformance 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	١,	
	Safe Food and Water	- TV - V		
30	Pasteurized eggs used where required			
31	Water and ice from approved source			
32	Variance obtained for specialized processing methods			
	Food Temperature Control			
33	Proper cooling methods used; adequate equipment for temperature control		į.	
34	Plant food properly cooked for hot holding		Š	
35	Approved thawing methods used		-	
36	Thermometers provided & accurate	10	7:	
	Food Identification			
37	Food properly labeled; original container			
- 55	Prevention of Food Contamination			
38	Insects, rodents, and animals not present			
39	Contamination prevented during food preparation, storage and display			
40	Personal cleanliness			
41	Wiping cloths: properly used and stored			
42	Washing fruits and vegetables			

		cos	R
	Proper Use of Utensils		
43	In-use utensils: properly stored		
44	Utensils, equipment & linens: properly stored, dried, & handled		
45	Single-use/single-service articles: properly stored and used		
46	Gloves used properly		
	Utensils, Equipment and Vending		
47	Food and non-food contact surfaces cleanable, properly designed, constructed, and used		
48	Warewashing facilities: installed, maintained, & used; test strips		
49	Non-food contact surfaces clean		
	Physical Facilities		
50	Hot and cold water available; adequate pressure		
51	Plumbing installed; proper backflow devices		
52	Sewage and waste water properly disposed		
53	Toilet facilities: properly constructed, supplied, & cleaned		
54	Garbage & refuse properly disposed; facilities maintained		
55	Physical facilities installed, maintained, and clean		
56	Adequate ventilation and lighting; designated areas used	, ,	
	Employee Training		
57	All food employees have food handler training		
58	Allergen training as required		

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Establishment: American	Legion Post #263		Establishmer	nt #: 210	
Water Supply: 🛛 Public	Private Waste V	Vater System: 🛛 Public 🗌	Private		
Sanitizer Type: Chlorine		PPM: <u>100</u>		Heat:	
		TEMPERATURE OBSERVA	ATIONS		
Item/Location	Temp	Item/Location	Temp	Item/Location	Temp
All Temps in ∘F					
All Cold Holding Uni	ts ≤ 41				
Lil smokies on back w	all of 40				
walk-in cooler					
Coleslaw on L Shelf of v					
cooler, near door					
Ketchup in 3 door kitche	n fridge 36				
				-	
	OBS	ERVATIONS AND CORRECT	IVE ACTIONS		
Item Number	Violations o	ited in this report must be correc	cted within the t	ime frames below.	
*		No violations noted du	ring inspection		
CFPM Verification (name	1				
Marsha Wolpert 21446522					
Exp: 03/20/2023					
HACCP Topic: Discussed	Vomit and Diarrheal clear	-up procedures			
0.					
Marshy Walp	ert	Apr 11, 2019			
Person in Charge (Signature)		Date			
Person in Charge (Signature)					
; any for		Follow-up: Yes	No (Check or	ne) Follow-up Date: N/A	
Inspector (Signature)					