## **Food Establishment Inspection Report**

Page 1 of 2

								rage I or 2
Local Health Department Name and Address			No. of Risk Factor/Intervention Violations			0	Date	03/21/2019
Logan County Department of Public Health							Time In	9:30am
109 3rd St, P.O. Box 508, Lincoln, IL 62656 Phone: (2	217) 735-	2317	No. of Repeat Risk Factor/Intervention Violation			_ ]	Time in	
Establishment	License/	/Permit #	No. or Repea	t Risk Factor/intervention violatio	20115	0	Time Out	10:15am
Deep Roots Cafe and Bakery	213		Permit Holde	er	Risk C	ategory	1	
Street Address			Fay Boerma		High/Class I			
127 S Kickapoo St				spection				
City/State ZIP Code			Routine Inspection					
Lincoln, IL		62656	Troutine map					
FOODBORNE II	LLNESS	RISK FACTOR	S AND PUI	BLIC HEALTH INTERVENT	TION:	S		
Circle designated as mulianes status (INLOLIT N	Civels designated approling a status (IN OUT N/O N/A) for each purphased item							

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

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.

		man / mappiopinate sex to coo ana/or m						
	cos	=corrected on-site during inspection R=repeat violation	n					
Со	Compliance Status							
	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	- 41				

Compliance Status COS R									
Protection from Contamination									
15	ln ln	Food separated and protected							
16	In	Food-contact surfaces; cleaned and sanitized							
17	In	Proper disposition of returned, previously served, reconditioned and unsafe food							
Time/Temperature Control for Safety									
18	N/O	Proper cooking time and temperatures							
19	N/O	Proper reheating procedures for hot holding							
20	N/O	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							
Food/Color Additives and Toxic Substances									
27	In	Food additives: approved and properly used							
28	In	Toxic substances properly identified, stored, and used							
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
	Safe Food and Water		
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		-
35	Approved thawing methods used		
36	Thermometers provided & accurate	1	
	Food Identification		
37	Food properly labeled; original container		
- 55	Prevention of Food Contamination	0 0	
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		

## **Food Establishment Inspection Report**

Page 2 of 2

Establishment: Deep Roots	Cafe and Bakery		Establishmen	t #: 213	
Water Supply: Nublic	Private Waste	Water System: ⊠ Public □	Private		
Sanitizer Type: Quat		PPM: 200		Heat:	
		TEMPERATURE OBSERVA	ATIONS		
Item/Location	Temp	Item/Location	Temp	Item/Location	Temp
All Temps in ∘F					
All Cold Holding Units	≤ 41				
Taco meat in Kitchen fridge	, L side 40				
Chili in Kitchen fridge, R					
Chicken Salad in prep ta	ble 38				
	ОВ	SERVATIONS AND CORRECT	TIVE ACTIONS		
Item Number	Violations	cited in this report must be correc	cted within the ti	me frames below.	
	oted during inspection	on			
140 Violations I	oted daring inopeous	011			
CFPM Verification (name, e	vniration date ID#):				
Fay Boerma					
21508991					
Exp: 10/23/2023					
HACCP Topic: Discussed for	od sources				
Fay & Boenna		Mar 21, 2019			
Person in Charge (Signature)		Date			
λ 0					
( Jay A -		Follow-up: Yes	No (Check on	e) Follow-up Date: N/A	
Inspector (Signature)					