Food Establishment Inspection Report

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Local Health Department Name and Address			No. of Risk Factor/Intervention Violations		0	Date	05/24/2019
Logan County Department of Public Health						Time In	10:25am
109 3rd St, P.O. Box 508, Lincoln, IL 62656 Phone: (2	17) 735-	2317			_ 1	mile in	10.234111
Establishment License/		Permit #	No. of Repeat Risk Factor/Intervention Violations		0	Time Out	11:00am
American Legion Post #447 319			Permit Holder Risk Category				
Street Address			American Legion Post #447 High/Class I				
100 E. Scroggin			Purpose of Inspection				
City/State		ZIP Code	Routine Inspection				
Mt. Pulaski, IL 62548							
FOODBORNE IL	LNESS	RISK FACTORS	S AND PUBLIC HEALTH INTERVENT	TIONS	5		

Circle designated compliance status (IN, OUT, N/O, N/A) for each numbered item 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 R =repeat violatio	11	
Со	mpliance Status		cos	R
Ξ,		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	N/O	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		
		GOOD	DET	ΓΛI

Compliance 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						
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		Ľ.
34	Plant food properly cooked for hot holding		ŝ
35	Approved thawing methods used	3 5	-
36	Thermometers provided & accurate	10	
	Food Identification		
37	Food properly labeled; original container		
	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		
			_

		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		

Washing fruits and vegetables

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Establishment: America	n Legion Post #447		Establishmer	nt #: <u>319</u>	
Water Supply: 🔀 Pub	olic 🗌 Private 💮 Wast	e Water System: 🛛 Public 🔲	Private		
Sanitizer Type: Chlorine	2	PPM: 100		Heat:	
		TEMPERATURE OBSERVA	TIONS		
Item/Locatio	n Temp	Item/Location	Temp	Item/Location	Temp
All Temps in	F	cream cheese in brown	36		
All Cold Holding U	Inits ≤ 41	storage fridge			
Pickles in double doo	or kitchen 38				
fridge					
Green Beans add-in,	in double 35				
door kitchen fri					
	0	BSERVATIONS AND CORRECT	VE ACTIONS	S	·
ltem Number	Violation	ns cited in this report must be correct	ed within the t	time frames below.	
		No Violations Noted Dur	ing Inspectior	า	
	ne, expiration date, ID#):				
Michael Richn 01171754	ier				
Exp: 04/26/20	20				
HACCP Topic: Discusse	d clean-up procedures fo	or vomit and diarrheal accidents			
mike Riche	`	May 24, 2019			
Person in Charge (Signature)		Date			
λ 1			_		
Jay A 2		Follow-up: Yes	No (Check or	ne) Follow-up Date: N/A	
inspector (signature)					