Food Establishment Inspection Report

Page 1 of 2

						1 ugc 1 01 2	
Local Health Department Name and Address	No. of Risk Factor/Intervention Violations		0	Date	07/14/2022		
Logan County Department of Public Health			U	Time In	2:00PM		
109 3rd St, P.O. Box 508, Lincoln, IL 62656 Phone: (2	No. of Donast Bisk Factor/Intervention Violat	ions	_	Time in	2.001 101		
Establishment License/Permit #		No. of Repeat Risk Factor/Intervention Violat	JOHS	0	Time Out	2:30PM	
Faith Assembly of God 305		Permit Holder Risk Category					
Street Address	Faith Assembly of God High/Class I						
1225 Nicholson Rd	Purpose of Inspection						
City/State	ZIP Code	Routine Inspection					
Lincoln, IL	Nodalic inspection						
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.

cos=corrected on-site during inspection						
Co	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	N/O	Proper eating, tasting, drinking, or tobacco use				
7	N/O	No discharge from eyes, nose, and mouth				
		Preventing Contamination by Hands				
8	N/O	Hands clean and properly washed				
9	N/A	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 RETAIL						

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					
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	In	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	, v	,
	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		-
36	Thermometers provided & accurate	10	-
	Food Identification		
37	Food properly labeled; original container	4 0	
	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						

Food Establishment Inspection Report

Establishr	ment: Faith Assembly of (God		Establishme	nt #: 305	Page 2 of 7
	pply: 🛛 Public 🗌 Pri		re Water System: ⊠ Public □		-	
	Type: Quat		PPM: 200	Tivate	Heat:	
Samuel	Type. Quat					
	ltana/Laatian	T	TEMPERATURE OBSERVA		than the setting	T
	Item/Location	Temp	Item/Location	Temp	Item/Location	Temp
	All Temps in ∘F Cold Holding Units ≤	41				
All C	Loid Holding Offics 5	41				
Pickles, R kitchen fridge 36						
FICK	ies, it kitchen mage	30				
Potato	Salad, L kitchen fridge	38				
, state	January E Miterieri i i i i i i i i i i i i i i i i i					
			BSERVATIONS AND CORRECT	IVE ACTIONS	 S	
Item			ns cited in this report must be correc			
Number						
			No Violations Noted Du	ring Inspection	 n	
			No violations noted bu	ing mspection		
CFPM Ve	rification (name, expirati	on date, ID#):				
Kam	ii Palmer, info on file					
HACCP To	opic: Discussed/reviewe	d hand washin	g process used at establishment			
	K &n (
	4.80		Jul 14, 2022			
Person in Ch	narge (Signature)	Date				
0	Λ					
. X	Jul Lie		Follow-up: Yes	⊠ No (Check o	ne) Follow-up Date: N/A	
Inspector (Si	ignature)			(225, 0	,	