## **Food Establishment Inspection Report**

Page 1 of 2

Local Health Department Name and Address	No. of Risk Factor/Intervention Violations		0	Date	11/27/2019		
Logan County Department of Public Health			0	Time In	9:40 AM		
109 3rd St, P.O. Box 508, Lincoln, IL 62656 Phone: (217) 735-2317			No. of Donald Biol Foot of the continuo Violetic or				
Establishment	Permit #	No. of Repeat Risk Factor/Intervention Violations		0	Time Out	10:25 AM	
Flossie & Delzena'sGormet Grind & Gifts		Permit Holder Risk Ca		ategory	tegory		
Street Address	Heather Cosby		Medium/Class II				
600 Broadway St.	Purpose of Inspection						
City/State	ZIP Code	Routine Inspection					
Lincoln, IL		62656	Noutille 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.

	CO3=	torrected on-site during inspection <b>k</b> -repeat violatio	11			
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	ln	Proper use of restriction and exclusion				
5	ln	Procedures for responding to vomiting and diarrheal events				
		Good Hygienic Practices				
6	ln	Proper eating, tasting, drinking, or tobacco use				
7	ln	No discharge from eyes, nose, and mouth				
Preventing Contamination by Hands						
8	ln	Hands clean and properly washed				
9	ln	No bare hand contact with RTE food or a pre-approved alternative procedure properly allowed				
10	ln	Adequate handwashing sinks properly supplied and accessible				
Approved Source						
11	ln	Food obtained from approved source				
12	N/O	Food received at proper temperature				
13	ln	Food in good condition, safe, and unadulterated				
14	N/A	Required records available: shellstock tags, parasite destruction				
	GOOD RETAIL I					

Co	mpliance Status		cos	R			
Protection from Contamination							
15	ln	Food separated and protected					
16	ln	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/A	Proper reheating procedures for hot holding					
20	N/A	Proper cooling time and temperature					
21	N/O	Proper hot holding temperatures					
22	ln	Proper cold holding temperatures					
23	ln	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	ln	Food additives: approved and properly used					
28	ln	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			4
32	Variance obtained for specialized processing methods			
	Food Temperature Control			
33	Proper cooling methods used; adequate equipment for temperature control			ı [
34	Plant food properly cooked for hot holding			
35	Approved thawing methods used			
36	Thermometers provided & accurate			
	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			5
40	Personal cleanliness			5
41	Wiping cloths: properly used and stored			5
42	Washing fruits and vegetables			ıF

-				_
			cos	R
		Proper Use of Utensils		
43		In-use utensils: properly stored		
44		Utensils, equipment & linens: properly stored, dried, & handled		Г
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 $\ensuremath{U}$		
48		Warewashing facilities: installed, maintained, & used; test strips		
49	X	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
	nent: Flossie & Delzena's			Establishmen	nt #: 298	
Water Sup	oply: 🛛 Public 🗌 Pri	vate Wast	e Water System: Nublic Dublic	Private		
Sanitizer T	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				
Slice	d turkey, prep table	40				
	ken salad, prep table	39				
	patty, kitchen fridge	39				
	nustard, kitchen fridge	40				
	pkin bar, prep fridge	39				
	p sar, propage					
		0	BSERVATIONS AND CORRECT	IVE ACTIONS		
Item			as cited in this report must be correc			
Number 49	Pren table soiled wit				cabinet. Clean all non-food conta	ct surfaces
.5			ation. Reference section 4-602.1			
	Next Routine Inspec					
	теле подеть торес					
CFPM Ve	rification (name, expirati	ion date, ID#):				
Heath	er Cosby, info on file					
HACCP To	opic: Discussed critical co	ontrol points fo	or sanitizer used in establishmen	t	-	
La	when (6<1-/	•	Nov 27, 2019			
Person in Charge (Signature)		Date				
,	0					
1X Su	NA.		Follow-up: Yes	No (Check on	ne) Follow-up Date: N/A	
Inspector (Si	grature)		·	_ ·	•	