Food Establishment Inspection Report

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Local Health Department Name and Address	No. of Risk Factor/Intervention Violations		n	Date	12/16/2022		
Logan County Department of Public Health 109 3rd St, P.O. Box 508, Lincoln, IL 62656 Phone: (217) 735-2317				Time In	11:50AM		
Establishment License/Permit #			No. of Repeat Risk Factor/Intervention Violations 0			Time Out	12:20PM
CAPCIL Sr. Meal Site - Friendship Manor		Permit Holder Risk Category			,		
Street Address			Community Action Partnership of Central IL	ral IL Medium/Class II			
925 Primm Rd.	Purpose of Inspection						
City/State ZIP Code			Routine Inspections				
Lincoln, IL 62656							

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 - k =repeat violatio	"				
Compliance Status C							
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	In	Food received at proper temperature					
13	In	Food in good condition, safe, and unadulterated					
14	N/O	Required records available: shellstock tags, parasite destruction	2				
	7	COOD	DET	7 11			

Coi	mpliance Status		cos	R
	e v	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/A	Proper cooking time and temperatures		
19	N/A	Proper reheating procedures for hot holding		
20	N/O	Proper cooling time and temperature		
21	In	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

	1	- 1/1/10				
	Safe Food and Water	1/2/				
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	- 3 E				
34	Plant food properly cooked for hot holding					
35	Approved thawing methods used	- 5				
36	Thermometers provided & accurate	-:0:				
	Food Identification					
37	Food properly labeled; original container	12,0				
1.57	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					

R			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						
1	47	Food and non-food contact surfaces cleanable, properly designed, constructed, and used						
-	48	Warewashing facilities: installed, maintained, & used; test strips						
ô	49	Non-food contact surfaces clean		ji -				
4		Physical Facilities						
	50	Hot and cold water available; adequate pressure						
1	51	Plumbing installed; proper backflow devices						
1	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: CAPCIL Sr. N	leal Site - Friendship Ma	anor	Establishme	nt #: 377	
Water Supply: Public [Private Waste V	Vater System: 🗌 Public 📗	Private		
Sanitizer Type: Chlorine		PPM: 100		Heat:	
		TEMPERATURE OBSERVA	ATIONS		
Item/Location	Temp	Item/Location	Temp	Item/Location	Temp
All Temps in ∘F					
All Cold Holding Units	≤ 41				
Ranch, white kitchen frid	dge 40				
Potato wedges, in meal t	ray 160				
Fish stick in meal tray					
,					
	OBS	ERVATIONS AND CORRECT	TIVE ACTIONS	S	
Item Number	Violations c	ited in this report must be correc	cted within the t	time frames below.	
		No Violations Noted Du	ring Inspection	າ	
CFPM Verification (name, e	xpiration date, ID#):				
Several present Info on file					
HACCP Topic: Discussed cle	aning and sanitizing pro	ocedures used in establishme	nt	,	
	>	Dec 16, 2022			
Person in Charge (Signature)		Date			
la di la companya di		Follow-up: Yes	⊠ No (Check o	ne) Follow-up Date: N/A	
Inspector (Righatura)					