## Food Establishment Inspection Report

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Least Health Department Name and Address							Y							
Local Health Department Name and Address Logan County Department of Public Health							No. of Risk Factor/Intervention Violations 0 Date 03/28							_
109 3rd St, P.O. Box 508, Lincoln, IL 62656 Phone: (217) 735-2317						No. of Report Disk Easter/Intervention Violations						8: 45 /	5 AM	
Establishment License/Permit #												9:30	١M	
Carroll Catholic School 245						Permit Holder Risk Category								
Street Address						Holy Family Church High/Class I Purpose of Inspection								$\neg$
111 Fourth St.														
City/State ZIP Code Lincoln, IL 62656						Routine Inspection								
Line	FOODBORNE ILLNESS RISK FACTORS AND PUBLIC HEALTH INTERVENTIONS													-
														-
Circle designated compliance status (IN, OUT, N/O, N/A) for each numbered i IN=in compliance OUT=not in compliance N/O=not observed N/A=not a							hlo	Risk factors are	e important prac	tices or proce	dures identified	d as the	mos	st
Mark "X" in appropriate box for COS and/or R							prevalent contributing factors of foodborne illness or injury. Public heal interventions are control measures to prevent foodborne illness or injury							
COS=corrected on-site during inspection R=repeat violation								interventions a	re control measu	ires to prever	it foodborne illn	iess or i	njur	y.
Compliance Status COS							R Compliance Status COS R							
14	,	Supervision				Protection from Contamination								
1	In	Person in charge present, demonstra	tes knowledge, and			] [	15	In	Food separated a	nd protected				
2	In	performs duties Certified Food Protection Manager (C				$\left  \right $	16	In	Food-contact surf	,			_	
2		Employee Health		_	<u> </u>	11	17	In	Proper disposition reconditioned and		reviously served,			
		Management, food employee and co	nditional employee:	1		Time/Temperature Control for Safety					r Safetv	- de		-
3	In	knowledge, responsibilities and report				18 N/O Proper cooking time and temperatures				Ť	T			
4	In	Proper use of restriction and exclusion	n				19	N/O	Proper reheating				1	
5	In	Procedures for responding to vomitin	g and diarrheal events			20 N/O Proper cooling time and temperature				ature				
- 1		Good Hygienic Practices		1	_		21	N/O	Proper hot holdin	g temperature:	5			
6	In	Proper eating, tasting, drinking, or to		-	-		22	In	Proper cold holdi	ng temperature	'S			
7	In	No discharge from eyes, nose, and m		4			23	In	Proper date mark	ing and disposi	tion		_	
8	In	Preventing Contamination by I	Hands	1	1		24	N/A	Time as a Public H	lealth Control;	procedures & reco	ords		
-		Hands clean and properly washed No bare hand contact with RTE food	or a pre-approved							er Advisory				-
9	N/O	alternative procedure properly allow					25	N/A			raw/undercooked •	food	-	_
10 In Adequate handwashing sinks properly supplied and accessible							26	NI/A	Highly Suscep	•			- 1	_
		Approved Source					26	N/A Eoor	d/Color Additive		ed foods not offer	ea		-
11	In	Food obtained from approved source	!				27	In	Food additives: a			-	-T	-
12	In	Food received at proper temperature		-			28	In	Toxic substances	· · ·		sed	-	-
13	In	Food in good condition, safe, and una		-	<u> </u>				nformance with	,		[	~	
14	N/A	N/A Required records available: shellstock tags, parasite destruction					29	N/A	Compliance with			СР	Т	
			GOOI	D RE	TAIL	P	RAC	CTICES						
		Good Retail Practices are prevent	ative measures to co	ntrol t	he ad	diti	ion o	f pathogens, chemi	cals, and physica	l objects into	foods.			
Mark "X" in box if numbered item is not in compliance Mark "X" in appropriate box													n	
COS R					R								os	R
		Safe Food and Water				Proper Use of Utensils								
30		sed where required			_	43	-	In-use utensils: prope					_	_
31		Water and ice from approved source			_	44 Utensils, equipment & linens: properly stored, dried, & handled						_	_	
32	32 Variance obtained for specialized processing methods				_	45         Single-use/single-service articles: properly stored and used           46         Gloves used properly							-	-
33	Proper cooling met	Food Temperature Control			_	40	<u>'</u>		Iltensils Fauinm	ent and Ven	ding			-
34	Proper cooling methods used; adequate equipment for temperature control Plant food properly cooked for hot holding			<u>- 2 8</u>	-	Utensils, Equipment and Vending						ucted.	1	
35		Approved thawing methods used				47	-	and used					_	
36						48	+ +	Warewashing facilities		ined, & used; t	est strips		_	$\neg$
Food Identification						49 Non-food contact surfaces clean							_	
37 Food properly labeled; original container						Physical Facilities     50 Hot and cold water available; adequate pressure						_		
	Prevention of Food Contamination					-	-							$\neg$
38	Insects, rodents, and animals not present					51     Plumbing installed; proper backflow devices       52     Sewage and waste water properly disposed						-	-	
39	Contamination prevented during food preparation, storage and display				52     Sewage and waste water properly disposed       53     Toilet facilities: properly constructed, supplied, & cleaned							-		
40	Personal cleanliness					54 Garbage & refuse properly disposed; facilities maintained								
41 Wiping cloths: properly used and stored					_	55         Physical facilities installed, maintained, and clean								
42 Washing fruits and vegetables						56	5	Adequate ventilation	and lighting; desig	nated areas use	d			
									Employe	e Training				
						57	-	All food employees ha	ave food handler tr	aining				
							3	Allergen training as re	equired					

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Establishm	ent: Carroll Catholic Sch	ool		Establishment #: 245						
Water Sup	ply: 🛛 Public 🗌 Priv	vate Wa	aste Water System: 🔀 Public 🗌	Private						
Sanitizer T	ype: Chlorine		PPM: 100	Heat:						
			TEMPERATURE OBSERVA							
	Item/Location	Temp	Item/Location	Temp	Vitem/Location	Temp				
	All Temps in ∘F									
All C	old Holding Units ≤	41								
Butter d	on top shelf in walk in		Ketchup on top shelf in walk in							
	ridge in kitchen	40	fridge in kitchen	40						
	on top shelf in walk in									
fi	ridge in kitchen	39	Milk in cold holding units in							
Turkey i	n bottom shelf in walk		cafeteria	40						
in	fridge in kitchen	39								
			OBSERVATIONS AND CORRECT	VE ACTIONS						
ltem Number		Violati	ions cited in this report must be correct	ed within the tir	ne frames below.					
	No violations noted during inspection									
CFPM Ver	ification (name, expiration	on date, ID#	<i>ŧ</i> ):							
	Kathy Buse									
   F	2147190514 Exp: 05.30.2023									
		es for vomit	ting and diarrheal events							

Kor Burn

Mar 28, 2022

Date

Person in Charge (Signature)

Inspector ature)

Follow-up: Yes X No (Check one)

Follow-up Date: N/A