

# Food Establishment Inspection Report

Local Health Department Name and Address Woodford County Health Department 1831 S. Main Street, Eureka, IL 61530		No. of Risk Factor/Intervention Violations	1	Date	08/28/2018
		No. of Repeat Risk Factor/Intervention Violations		0	Time In
Establishment Busy Corner	License/Permit # 18 058	Permit Holder Selvey's Busy Corner Inc		Risk Category I	
Street Address 302 S. Eureka Street/State Route 117		Purpose of Inspection Routine Inspection			
City/State Goodfield, IL	ZIP Code 61742				

## 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.

Compliance Status		COS	R	Compliance Status		COS	R
<b>Supervision</b>				<b>Protection from Contamination</b>			
1	In			15	In		
Person in charge present, demonstrates knowledge, and performs duties				Food separated and protected			
2	In			16	In		
Certified Food Protection Manager (CFPM)				Food-contact surfaces; cleaned and sanitized			
<b>Employee Health</b>				<b>Time/Temperature Control for Safety</b>			
3	In			17	In		
Management, food employee and conditional employee; knowledge, responsibilities and reporting				Proper disposition of returned, previously served, reconditioned and unsafe food			
4	In			18	In		
Proper use of restriction and exclusion				Proper cooking time and temperatures			
5	In			19	In		
Procedures for responding to vomiting and diarrheal events				Proper reheating procedures for hot holding			
<b>Good Hygienic Practices</b>				20	In		
6	In			Proper cooling time and temperature			
Proper eating, tasting, drinking, or tobacco use				21	In		
7	In			Proper hot holding temperatures			
No discharge from eyes, nose, and mouth				22	In		
<b>Preventing Contamination by Hands</b>				Proper cold holding temperatures			
8	In			23	In		
Hands clean and properly washed				Proper date marking and disposition			
9	In			24	N/A		
No bare hand contact with RTE food or a pre-approved alternative procedure properly allowed				Time as a Public Health Control; procedures & records			
10	Out		X	<b>Consumer Advisory</b>			
Adequate handwashing sinks properly supplied and accessible				25	In		
<b>Approved Source</b>				Consumer advisory provided for raw/undercooked food			
11	In			<b>Highly Susceptible Populations</b>			
Food obtained from approved source				26	In		
12	N/O			Pasteurized foods used; prohibited foods not offered			
Food received at proper temperature				<b>Food/Color Additives and Toxic Substances</b>			
13	In			27	In		
Food in good condition, safe, and unadulterated				Food additives: approved and properly used			
14	N/A			28	In		
Required records available: shellstock tags, parasite destruction				Toxic substances properly identified, stored, and used			
<b>GOOD RETAIL PRACTICES</b>				Compliance with variance/specialized process/HACCP			
29	N/A						

**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

Compliance Status		COS	R	Compliance Status		COS	R
<b>Safe Food and Water</b>				<b>Proper Use of Utensils</b>			
30				43	In		
Pasteurized eggs used where required				In-use utensils: properly stored			
31				44			
Water and ice from approved source				Utensils, equipment & linens: properly stored, dried, & handled			
32				45			
Variance obtained for specialized processing methods				Single-use/single-service articles: properly stored and used			
<b>Food Temperature Control</b>				46			
33				Gloves used properly			
Proper cooling methods used; adequate equipment for temperature control				<b>Utensils, Equipment and Vending</b>			
34				47	X		X
Plant food properly cooked for hot holding				Food and non-food contact surfaces cleanable, properly designed, constructed, and used			
35				48			
Approved thawing methods used				Warewashing facilities: installed, maintained, & used; test strips			
36				49	X		X
Thermometers provided & accurate				Non-food contact surfaces clean			
<b>Food Identification</b>				<b>Physical Facilities</b>			
37				50			
Food properly labeled; original container				Hot and cold water available; adequate pressure			
<b>Prevention of Food Contamination</b>				51			
38				Plumbing installed; proper backflow devices			
Insects, rodents, and animals not present				52			
39				Sewage and waste water properly disposed			
Contamination prevented during food preparation, storage and display				53			
40				Toilet facilities: properly constructed, supplied, & cleaned			
Personal cleanliness				54			
41				Garbage & refuse properly disposed; facilities maintained			
Wiping cloths: properly used and stored				55			
42				Physical facilities installed, maintained, and clean			
Washing fruits and vegetables				56	X		X
				Adequate ventilation and lighting; designated areas used			
<b>Employee Training</b>				<b>Employee Training</b>			
57				57			
All food employees have food handler training				All food employees have food handler training			
58	X			58	X		
Allergen training as required				Allergen training as required			

# Food Establishment Inspection Report

Establishment: Busy Corner

Establishment #: 18 058

Water Supply:  Public  Private

Waste Water System:  Public  Private

Sanitizer Type: Quaternary ammonium

PPM: 200

Heat: 191

### TEMPERATURE OBSERVATIONS

Item/Location	Temp	Item/Location	Temp	Item/Location	Temp
Hash brown casserole/steam unit	191	Ham/prep cooler	36		
Sausage gravy/steam unit	165	Turkey/prep cooler	37		
Roast beef/steam unit	144	Chunky chicken salad/RIC	39		
Chili/soup urn	192	Macaroni & cheese/WIC	96		
Cheese soup/soup urn	194	Peeled hard boiled eggs/WIC	36		
Vegetable soup/soup urn	193	Cottage cheese/RIC	40		
		Cut lettuce/RIC	39		
		Peanut butter bliss pie/pie cooler	39		
		Vanilla ice milk/soft serve unit	41		

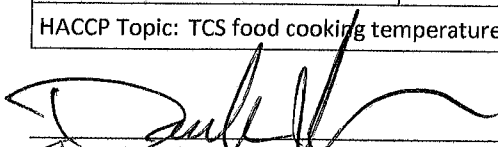
### OBSERVATIONS AND CORRECTIVE ACTIONS

Item Number	Violations cited in this report must be corrected within the time frames below.
10	6-301.14 (C) Observed a sign or poster that notifies food employees to wash their hands was not provided at hand washing sinks in food prep areas used by food employees. Handwashing signs provided during inspection.
47	4-501.12 (C) Observed red cutting board on storage rack with crevices and knife grooves which prevents proper cleaning and sanitizing to prevent pathogenic microorganism transmission. Red cutting board discarded by male person-in-charge during inspection.
49	4-602.13 (C) Observed in kitchen accumulated dust and debris on air intake filters of Manitowoc ice machine. Air intake filters cleaned by person-in-charge during inspection.
56	6-501.110 (C) Observed in kitchen by warewashing area employee personal items were found stored improperly above soda syrup boxes. Employee personal items removed to lower shelf of rolling cart by male food employee during inspection.
58	410 ILCS 625 (C) Observed documentation that only one (1) certified food protection manager has food allergy awareness training as required. Please correct this violation within 90 days or at least by next routine inspection.

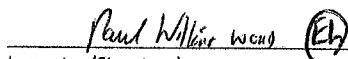
CFPM Verification (name, expiration date, ID#): Derek Vollmer

Derek Vollmer 14667609 - ServSafe Exp. 1/2022	Lisa Merritt 16225972 - ServSafe Exp. 3/2023	Jesse Schmidgall 21201737 - NRFSP Exp. 3/2021	Kris Thomas 21201738 - NRFSP Exp. 3/2021
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HACCP Topic: TCS food cooking temperatures

  
 Person In Charge (Signature)

Aug 28, 2018  
 Date

  
 Inspector (Signature)

Follow-up:  Yes  No (Check one)

Follow-up Date: \_\_\_\_\_

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OBSERVATIONS AND CORRECTIVE ACTIONS

Table with 2 columns: Item Number and Observations/Corrective Actions. It contains several rows of text providing inspection details and requirements.

Handwritten signature of Paul Wilkie, WCHD. Person in Charge (Signature)

Aug 28, 2018 Date

Handwritten signature of Paul Wilkie, WCHD. Inspector (Signature)

Follow-up: [ ] Yes [X] No (Check one)

Follow-up Date: \_\_\_\_\_