

# 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	09/12/2018
		No. of Repeat Risk Factor/Intervention Violations	0	Time In	1:25 PM
Establishment	License/Permit #	Permit Holder	Risk Category		
Riggert's Die Scheune	18 016	Tellmer Holdings Inc	II		
Street Address		Purpose of Inspection			
1348 Riggert Road		Routine Inspection			
City/State	ZIP Code				
Metamora, IL	61548				

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

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

# Food Establishment Inspection Report

Establishment: Riggert's Die Scheune Establishment #: 18 016

Water Supply:  Public  Private Waste Water System:  Public  Private

Sanitizer Type: Chlorine PPM: 100 Heat: N/A

TEMPERATURE OBSERVATIONS					
Item/Location	Temp		Item/Location	Temp	
None Observed			None Observed		

### OBSERVATIONS AND CORRECTIVE ACTIONS

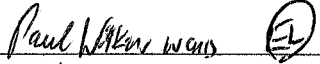
Item Number	Violations cited in this report must be corrected within the time frames below.
5	2-501.11 (Pf) Observed food establishment does not have procedures for employees to follow when responding to discharging of vomitus or fecal matter. Procedures provided during inspection.

CFPM Verification (name, expiration date, ID#): Laura Riggert

Laura Riggert 01669181 - IL FSSMC Exp. 3/2020			
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HACCP Topic: TCS food cooking temperatures, proper personal hygiene

  
Person in Charge (Signature) Sep 12, 2018  
Date

  
Inspector (Signature) Follow-up:  Yes  No (Check one) Follow-up Date: \_\_\_\_\_

# Food Establishment Inspection Report

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Establishment #: 18 016

Item Number	OBSERVATIONS AND CORRECTIVE ACTIONS
	Violations cited in this report must be corrected within the time frames below.
	Facility is still classified as a Category II food establishment
	Please go to our website to view/print the Fall/Winter 2016 newsletter
	Please note that if establishment or group fundraiser is cooking/preparing/serving food outside of kitchen facility (grill, barbeque, steak-fry, cook-out, etc.), a temporary food/drink permit must be applied for & approved by WCHD.
	WCHD provides free food safety in-services to establishments & their staff
	Next certified food protection manager 8-hour class & exam offered @ WCHD: October 2 & 4, 2018
	Effective January 1, 2017, Food Handler certification is required for all food employees who do not already have CFPM or IL FSSM/C certification. "Food employee" means an individual working with unpackaged food, food equipment or utensils, or food-contact surfaces. Food handler certification is required 30 days from the hire date of food employees.
	Ensure compliance with Smoke-Free IL Act - public places and places of employment must be completely smoke-free inside and within 15 feet from entrances, exits, windows that open and ventilation intakes; signage posted at entrances & exits; no vaping or e-cigarette use in food & drink prep area, dishwashing area, and storage area; no smoking within building structure.
	Please collect a water sample at least once a year to ensure a potable water supply
	Please note that this facility does not have a regular weekly Sunday brunch nor holiday brunch scheduled, but still has the option to schedule private catering functions on-site. Please note if any changes occur at this facility, please contact WCHD prior to changes occurring.

*Laura de Riggert*  
 Person in Charge (Signature)

\_\_\_\_\_  
 Sep 12, 2018  
 Date

\_\_\_\_\_  
 Paul Wilkins wchd  
 Inspector (Signature)

Follow-up:    Yes    No   (Check one)

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