

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	12/20/2018
		No. of Repeat Risk Factor/Intervention Violations	0	Time In	12:50 PM
Establishment	License/Permit #	Permit Holder		Risk Category	
Grace Fellowship Church	18 006	Grace Fellowship Church		II	
Street Address		Purpose of Inspection			
2730 County Road 1100 N		Routine Inspection			
City/State	ZIP Code				
El Paso, IL	61738				

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
Supervision				Protection from Contamination			
1	In			15	N/O		
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			
Employee Health				17	In		
3	In			Proper disposition of returned, previously served, reconditioned and unsafe food			
Management, food employee and conditional employee; knowledge, responsibilities and reporting				Time/Temperature Control for Safety			
4	In			18	N/O		
Proper use of restriction and exclusion				Proper cooking time and temperatures			
5	Out			19	N/A		
Procedures for responding to vomiting and diarrheal events				Proper reheating procedures for hot holding			
Good Hygienic Practices				20	N/A		
6	In			Proper cooling time and temperature			
Proper eating, tasting, drinking, or tobacco use				21	N/O		
7	In			Proper hot holding temperatures			
No discharge from eyes, nose, and mouth				22	In		
Preventing Contamination by Hands				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	In			Consumer Advisory			
Adequate handwashing sinks properly supplied and accessible				25	N/A		
Approved Source				Consumer advisory provided for raw/undercooked food			
11	In			Highly Susceptible Populations			
Food obtained from approved source				26	N/A		
12	N/O			Pasteurized foods used; prohibited foods not offered			
Food received at proper temperature				Food/Color Additives and Toxic Substances			
13	In			27	N/A		
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			
GOOD RETAIL PRACTICES				Compliance with variance/specialized process/HACCP			

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
Safe Food and Water				Proper Use of Utensils			
30				43			
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			
Food Temperature Control				46			
33				Gloves used properly			
Proper cooling methods used; adequate equipment for temperature control				Utensils, Equipment and Vending			
34				47			
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			
Thermometers provided & accurate				Non-food contact surfaces clean			
Food Identification				Physical Facilities			
37				50			
Food properly labeled; original container				Hot and cold water available; adequate pressure			
Prevention of Food Contamination				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			
				Adequate ventilation and lighting; designated areas used			
Employee Training				57			
57				All food employees have food handler training			
58				Allergen training as required			

Food Establishment Inspection Report

Establishment: Grace Fellowship Church

Establishment #: 18 006

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	Item/Location		Temp
			Chocolate milk/RIC	38				
			Hot dogs/RIC	37				

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 food employees to follow when responding to discharging of vomitus or fecal matter. Procedures for responding to vomit/diarrheal event provided during inspection.

CFPM Verification (name, expiration date, ID#): Jill Layden

Jill Layden 15199601 - ServSafe Exp. 6/2022			
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HACCP Topic: TCS food cooking temperatures, employee health policy requirements

Jill S Layden Dec 20, 2018
Person in Charge (Signature) Date

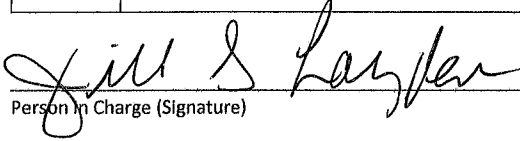
Paul Wilkin, wccm (El) Follow-up: Yes No (Check one) Follow-up Date: _____
Inspector (Signature)

Food Establishment Inspection Report

Establishment: Grace Fellowship Church

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OBSERVATIONS AND CORRECTIVE ACTIONS	
Item Number	Violations cited in this report must be corrected within the time frames below.
	Please correct any violations noted above ASAP, but at least by next routine inspection
	Please go to our website to view/print the WCHD Connection quarterly newsletter
	Facility is still classified as a Category II food establishment
	Please note that as of January 1, 2019, the person-in-charge must have CFPM or IL FSSMC certification and be on the premises
	during all hours of operation.
	Please note that if establishment or group fundraiser is cooking/preparing/serving food outside of kitchen facility (grill, barbeque, steak-fry, cook-out, group fundraiser, etc.), a temporary food permit must be applied for & approved by WCHD.
	Next certified food protection manager 8-hour class & exam offered @ WCHD: March 5 & 7, 2019
	Effective January 1, 2017, Food Handler certification is required for all food employees who do not already have CFPM or IL FSSMC
	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.
	This facility is on the NCPWS program and must routinely collect water samples as required


 Person in Charge (Signature)

Dec 20, 2018
 Date


 Inspector (Signature)

Follow-up: Yes No (Check one) Follow-up Date: _____