

Food Establishment Inspection Report

Page 1 of 3

Local Health Department Name and Address Woodford County Health Department 1831 S. Main Street, Eureka, IL 61530		No. of Risk Factor/Intervention Violations	2	Date	10/25/2023
Establishment Metamora Fields Golf Club		License/Permit #	23 157	No. of Repeat Risk Factor/Intervention Violations	0
Street Address 801 W. Progress Street		Permit Holder 18 Links LLC		Risk Category I	
City/State Metamora, IL		ZIP Code 61548		Purpose of Inspection Routine Inspection	

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
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	N/O		
Food received at proper temperature			
13	In		
Food in good condition, safe, and unadulterated			
14	N/A		
Required records available: shellstock tags, parasite destruction			
Protection from Contamination			
15	In		
Food separated and protected			
16	Out	X	
Food-contact surfaces; cleaned and sanitized			
17	In		
Proper disposition of returned, previously served, reconditioned and unsafe food			
Time/Temperature Control for Safety			
18	In		
Proper cooking time and temperatures			
19	N/O		
Proper reheating procedures for hot holding			
20	In		
Proper cooling time and temperature			
21	In		
Proper hot holding temperatures			
22	In		
Proper cold holding temperatures			
23	Out	X	
Proper date marking and disposition			
24	N/A		
Time as a Public Health Control; procedures & records			
Consumer Advisory			
25	In		
Consumer advisory provided for raw/undercooked food			
Highly Susceptible Populations			
26	N/A		
Pasteurized foods used; prohibited foods not offered			
Food/Color Additives and Toxic Substances			
27	N/A		
Food additives: approved and properly used			
28	In		
Toxic substances properly identified, stored, and used			
Conformance 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

Compliance Status		COS	R
Safe Food and Water			
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			
34			
Plant food properly cooked for hot holding			
35			
Approved thawing methods used			
36			
Thermometers provided & accurate			
Food Identification			
37			
Food properly labeled; original container			
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			
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			
47			
Food and non-food contact surfaces cleanable, properly designed, constructed, and used			
48			
Warewashing facilities: installed, maintained, & used; test strips			
49			
Non-food contact surfaces clean			
Physical Facilities			
50			
Hot and cold water available; adequate pressure			
51			
Plumbing installed; proper backflow devices			
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			

Food Establishment Inspection Report

Page 2 of 3

Establishment: Metamora Fields Golf Club

Establishment #: 23 157

Water Supply: ☒ Public ☐ Private Waste Water System: ☒ Public ☐ Private

Sanitizer Type: Quaternary ammonium/Chlorine

PPM: 200/<25

Heat: 167

TEMPERATURE OBSERVATIONS

Item/Location	Temp		Item/Location	Temp		Item/Location	Temp
Hot dogs/roller	177		Hot dog/RIC cook line	38			
Bratwurst/roller	195		Ham/RIC cook line	38			
utensil surface temperature/dish	167		Gravy-cooling/WIC	85			
			Shredded cheese/WIC	37			
			Sliced cheese/WIC	37			

OBSERVATIONS AND CORRECTIVE ACTIONS

Item Number	Violations cited in this report must be corrected within the time frames below.
16	4-501.114 (P) Observed with chlorine test kit concentration of chlorine sanitizing rinse at mechanical warewashing machine in kitchen and at bar measured less than 25 ppm and water temperature indicated 150° F in kitchen and 136° F at bar. Using test kit provided at establishment, chlorine sanitizing rinse at mechanical warewashing machine measured less than 25 ppm. A chlorine sanitizing solution shall have a concentration of 25-49 ppm when the water temperature is at least 120° F or 50-99 ppm when the water temperature is at least 75° F. Establishment will use the 3-compartment sink for sanitizing until the mechanical warewashing machine is repaired according to person-in-charge during inspection.
23	3-501.18 (P) Observed in RIC (cook line) plastic container of ham dated 10/15, which exceeds the 7 day requirement for TCS food. A food specified in ¶ 3-501.17(A) or (B) shall be discarded if it: (1) Exceeds the temperature and time combination specified in ¶ 3-501.17(A), except time that the product is frozen; (2) Is in a container or package that does not bear a date or day; or (3) Is inappropriately marked with a date or day that exceeds a temperature and time combination as specified in 3-501.17(A). Reviewed TCS food date marking requirements with food employee and person-in-charge during inspection. Ham discarded by person-in-charge during inspection.

CFPM Verification (name, expiration date, ID#): Madison Brinkman

Madison Brinkman 18gc0b-je2k404-State Food Safety Exp. 6/2028	Vickie Brinkman 18gc0d-je2k405-State Food Safety Exp. 6/2028	Emily Fischer L2SC-3-005495 - Learn 2 Serve Exp. 10/2025	Kally Blahnik L2SC-3-005475 - Learn 2 Serve Exp. 10/2025
---	--	--	--

HACCP Topic: TCS food temperature/date marking requirements, no bare hand contact with ready-to-eat food, employee health policy

Madison Brinkman

Person In Charge (Signature)

Oct 25, 2023

Date

Paul Wilson

Inspector (Signature)

Follow-up: ☐ Yes ☒ No (Check one)

Follow-up Date: _____

Food Establishment Inspection Report

Establishment: Metamora Fields Golf Club

Establishment #: 23 157

[illegible]

Madison B.
Person in Charge (Signature)

Oct 25, 2023

Date _____

Paul Wilkins wron
Inspector (Signature)

Follow-up: ☐ Yes ☒ No (Check one)

Follow-up Date: