

Food Establishment Inspection Report

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|--|--|---|--|------------------|
| Local Health Department Name and Address Woodford County Health Department 1831 S. Main Street, Eureka, IL 61530 | | No. of Risk Factor/Intervention Violations 0 | | Date 07/29/2024 |
| Establishment Jenkins Country Comforts & Farm Market | | No. of Repeat Risk Factor/Intervention Violations 0 | | Time In 12:45 PM |
| Street Address 1861 State Route 26 | | Permit Holder Country Comforts LLC | | Time Out 1:45 PM |
| City/State Metamora, IL | | Risk Category I | | |
| | | 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 | | |
| 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 | | | |

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Establishment: Jenkins Country Comforts & Farm Market

Establishment #: 24 184

Water Supply: Public Private

Waste Water System: Public Private

Sanitizer Type: Chlorine

PPM: 50/100

Heat: N/A

TEMPERATURE OBSERVATIONS

OBSERVATIONS AND CORRECTIVE ACTIONS

CFPM Verification (name, expiration date, ID#): Patricia Jenkins

Patricia Jenkins
21746562 - NRFSP
Exp 5/2026

HACCP Topic: TCS food temperature & date marking requirements, no bare hand contact with ready-to-eat food, allergen labeling

Patricia A. Jackson
Person in Charge (Signature)

Jul 29 2024

Date

Follow-up: Yes No (Check one)

Follow-up Date:

Inspector (Signature)

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Person In Charge (Signature)

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