

# 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	1	Date	08/15/2024
Establishment Snyder Village Healthcare Center	License/Permit # 24 153	No. of Repeat Risk Factor/Intervention Violations	0	Time In	10:35 AM
Street Address 1200 E. Partridge Street		Permit Holder Snyder Village Board of Directors	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
<b>Supervision</b>			
1	In	Person in charge present, demonstrates knowledge, and performs duties	
2	In	Certified Food Protection Manager (CFPM)	
<b>Employee Health</b>			
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	
<b>Good Hygienic Practices</b>			
6	In	Proper eating, tasting, drinking, or tobacco use	
7	In	No discharge from eyes, nose, and mouth	
<b>Preventing Contamination by Hands</b>			
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	
<b>Approved Source</b>			
11	In	Food obtained from approved source	
12	In	Food received at proper temperature	
13	In	Food in good condition, safe, and unadulterated	
14	N/A	Required records available: shellstock tags, parasite destruction	
<b>Protection from Contamination</b>			
15	In	Food separated and protected	
16	In	Food-contact surfaces; cleaned and sanitized	
17	In	Proper disposition of returned, previously served, reconditioned and unsafe food	
<b>Time/Temperature Control for Safety</b>			
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	Proper date marking and disposition	X
24	N/A	Time as a Public Health Control; procedures & records	
<b>Consumer Advisory</b>			
25	N/A	Consumer advisory provided for raw/undercooked food	
<b>Highly Susceptible Populations</b>			
26	In	Pasteurized foods used; prohibited foods not offered	
<b>Food/Color Additives and Toxic Substances</b>			
27	N/A	Food additives: approved and properly used	
28	In	Toxic substances properly identified, stored, and used	
<b>Conformance with Approved Procedures</b>			
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
<b>Safe Food and Water</b>			
30	Pasteurized eggs used where required		
31	Water and ice from approved source		
32	Variance obtained for specialized processing methods		
<b>Food Temperature Control</b>			
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		
<b>Food Identification</b>			
37	Food properly labeled; original container		
<b>Prevention of Food Contamination</b>			
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		
<b>Proper Use of Utensils</b>			
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		
<b>Utensils, Equipment and Vending</b>			
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		
<b>Physical Facilities</b>			
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	X Adequate ventilation and lighting; designated areas used		X
<b>Employee Training</b>			
57	All food employees have food handler training		
58	Allergen training as required		

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Establishment: Snyder Village Healthcare Center

Establishment #: 24 153

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

Sanitizer Type: Quaternary ammonium

PPM: 200

Heat: 180

## TEMPERATURE OBSERVATIONS

Item/Location	Temp	Item/Location	Temp	Item/Location	Temp
Mashed potatoes/prep	145	Shredded cheese/RIC	38	Diced tomatoes/Hall 3 bistro	36
Meatloaf/hot-holding cabinet	162	Sliced cheese/RIC	38	Sausage/Hall 3 bistro	41
Green beans/hot-holding cabinet	181	Milk/WIC	38	Liquid eggs/RIC Hall 3 bistro	40
Brown gravy/hot-holding cabinet	168	Ham/prep	36	Sliced tomatoes/RIC Hall 4 bistro	37
		Sausage/Hall 1 bistro	39	Sausage/RIC Hall 4 bistro	40
		Pancake batter-cooling/Hall 1	75	Liquid eggs/RIC Hall 4 bistro	39
		Liquid eggs/RIC Hall 1 bistro	40	Cottage cheese/RIC Hall 5 comm	38
		Cottage cheese/RIC Hall 2 bistro	38	Sausage/RIC Hall 5 comm room	30
		Liquid eggs/RIC Hall 2 bistro	39	Liquid eggs/RIC Hall 5 comm	40

## OBSERVATIONS AND CORRECTIVE ACTIONS

Item Number	Violations cited in this report must be corrected within the time frames below.
23	3-501.17 (Pf) Observed in Hall 2 Bistro cottage cheese marked with open date of 8-7 and in Community Room cottage cheese marked with open date of 7-26. TCS food held in a food establishment for more than 24 hours shall be clearly marked to indicate the date or day by which the food must be consumed on the premises, sold, or discarded when held at a temperature of 41° F or below for a maximum of 7 days. Reviewed HACCP concept with person-in-charge during inspection. Cottage cheese containers discarded by person-in-charge during inspection.
56	6-403.11 (C) Observed in kitchen in food prep area employee personal drink (half full 20 oz Mountain Dew) stored on shelf with spices and seasonings. Areas designated for employees to eat, drink, and use tobacco products shall be located so that food, equipment, linens, and single-service and single-use articles are protected from contamination. Employee personal drink moved to separate lower shelf by person-in-charge during inspection.

CFPM Verification (name, expiration date, ID#): Amy Schoon

Amy Schoon 20690497 - ServSafe Exp. 6/2026	Vicki Collins 24622133 - ServSafe Exp. 9/2028	Billie Jo Schumacher 1811570 - Always Food Safe Exp. 11/2027	Charles Doug Rogers 23600493 - ServSafe Exp. 3/2028
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HACCP Topic: TCS food temperature and date marking requirements, no bare hand contact with ready-to-eat food, employee health

*Amy Schoon, CFPM*  
Person In Charge (Signature)

Aug 15, 2024  
Date

*Paul Walker*  
Inspector (Signature)



Follow-up: ☐ Yes ☒ No (Check one)

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

# Food Establishment Inspection Report

Establishment: Snyder Village Healthcare Center

Establishment #: 24 153

[illegible]

Person in Charge (Signature) Abraham CSM

Aug 15, 2024

Date \_\_\_\_\_

Paul Wilkin  
Inspector (Signature)

Follow-up: ☐ Yes ☒ No (Check one)

Follow-up Date: