

Food Establishment Inspection Report

Page 1 of 3

Local Health Department and Address Woodford County Health Department 1831 S. Main Street Eureka, IL 61530			Number of Risk Factor/ Intervention Violations 0	Date 8/19/2025
			Number of Repeat Risk Factor/ Intervention Violations 0	Time In 10:20 AM
Establishment The Loft Rehabilitation and Nursing Home			Phone (309) 467-2337	Email amichels@theloftrehab.com
Address 700 N. Main Street			City/State Eureka, IL	ZIP Code 61530
License/Permit # 25 176		Permit Holder The Loft Rehabilitation and Nursing LLC	Purpose of Inspection Routine	Risk Category

FOODBORNE ILLNESS RISK FACTORS AND PUBLIC HEALTH INTERVENTIONS

Circle designated compliance status (IN, OUT, N/O, N/A) for each numbered item

Mark "X" in the appropriate box for COS and/or R

IN: in compliance OUT: not in compliance N/O: not observed N/A: not applicable 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 product 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 are properly supplied and accessible.		
Approved Source				
11	IN	Food obtained from an approved source.		
12	N/O	Food received at the proper temperature.		
13	IN	Food in good condition, safe, and unadulterated.		
14	N/A	Required records available: molluscan shellfish identification, and parasite destruction.		
Protection from Contamination				
15	IN	Food is separated and protected.		
16	IN	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	N/O	Proper cooling time and temperature.		
21	IN	Proper hot holding temperatures.		
22	IN	Proper cold holding temperatures.		
23	IN	Proper date marking and disposition.		
24	N/A	Time as a Public Health Control; procedures and records.		
Consumer Advisory				
25	N/A	Consumer advisory is provided for raw/undercooked food.		
Highly Susceptible Populations				
26	IN	Pasteurized foods are used; prohibited foods are not offered.		
Food/Color Additives and Toxic Substances				
27	N/A	Food additives: approved and properly used.		
28	IN	Toxic substances are 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 the box if the numbered item
Is not in compliance

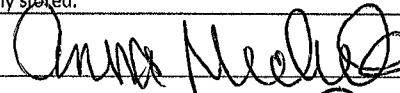
Mark "X" in the appropriate box
for COS and/or R

COS: Corrected on-site
during inspection

R: Repeat
violation

#	X	Compliance Status	COS	R	
Safe Food and Water					
30		Pasteurized eggs are used where required.			
31		Water and ice from an approved source.			
32		Variance obtained for specialized processing methods.			
Food Temperature Control					
33		Proper cooling methods are used; adequate equipment for temperature control.			
34		Plant food properly cooked for hot holding.			
35		Approved thawing methods used.			
36		Thermometers are provided and accurate.			
Food Identification					
37		Food properly labeled; original container.			
Prevention of Food Contamination					
38		Insects, rodents, and animals not present.			
39		Contamination is prevented during food preparation, storage, and display.			
40		Personal cleanliness.			
41		Wiping cloths: properly used and stored.			
42		Washing fruits, vegetables, and other plant food.			
Proper Use of Utensils					
43		In-use utensils: properly stored.			
Proper Use of Utensils (continued)					
44		Utensils, equipment, and linens: properly stored, dried, and handled.			
45		Single use/single service articles are 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, and used; test strips.			
49		Non-food contact surfaces are clean.			
Physical Facilities					
50		Hot and cold water available; adequate pressure.			
51		Plumbing installed; proper backflow devices.			
52		Sewage and wastewater properly disposed.			
53		Toilet facilities: properly constructed, supplied, and cleaned.			
54		Garbage and refuse are properly disposed; facilities are maintained.			
55		Physical facilities installed, maintained, and cleaned.			
56		Adequate ventilation and lighting; designated areas used.			
Food Handler and Allergen Awareness					
57		Food handler training 410 ILCS 625/3.06.			
58		Allergen awareness training for CFPM 410 ILCS 625/3.07 (rest. only).			
59		Allergen awareness notice 410 ILCS 625/3.08 (rest. only).			

Person in Charge (Signature)



Date:

8/19/2025

Inspector (Signature)



Follow-up: YES NO (Check one) Follow-up Date:

Food Establishment Inspection Report

Page 2 of 3

Establishment: The Loft Rehabilitation and Nursing Home

Establishment #: 25 176

Water Supply: Public Private

Waste Water System: Public Private

Sanitizer Type: Quaternary ammonium/Chlorine

PPM: 200/25-49

Heat: N/O

TEMPERATURE OBSERVATIONS					
Item/Location	Temp	Item/Location	Temp	Item/Location	Temp
Beef tips/steamer	180	Sliced cheese/WIC	38		
Carrots & peas/steamer	173	Deli meat/WIC	38		
Mashed potatoes/steamer	171	Cream corn/WIC	36		
Brown gravy/steam table	150	Peeled hard boiled eggs/WIC	37		
		Milk/WIC	38		
		Shredded cheese/WIC	38		
		Milk/RIC	40		

NOTES

Please correct any core (C) violations noted below ASAP but at least by next routine inspection

Facility is still classified as a Category I food establishment

The person-in-charge shall have CFPM certification and be on the premises during all hours of operation

Food handler certification is required for all food employees without CFPM certification. "Food employee" means an individual working with unpackaged food, food equipment or utensils, or food-contact surfaces. Food handler certification is required within 30 days from the hire date of food employees and valid for three (3) years from date of issuance.

At the time of this inspection, this establishment appears to meet the requirements to waive the 3rd inspection

CFPM Verification (name, expiration date, ID#): Anna Michels

Anna Michels 23266366 - ServSafe Exp. 2/2028	Ron Ganther 1309009 - Always Food Safe Exp. 4/2027	LuAnn Kennedy L2SC-3-039398 - Learn 2 Serve Exp. 3/2029	Sharon Meeks 24903762 - ServSafe Exp. 12/2028
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HACCP Topic: TCS food date marking & temperature requirements, no bare hand contact with ready-to-eat food, sanitizing concentrations

Illinois Requirements: Use of **non-latex** gloves for food handling and preparation 410 ILCS 180/10.
 Appropriate **default beverage** for children's meal 410 ILCS 620/21.5.

OBSERVATIONS AND CORRECTIVE ACTIONS

Item Number	Violations cited in this report must be corrected within the time frames below.
	No violations observed at time of inspection.

Food Establishment Inspection Report

Page 3 of 3

Establishment: The Loft Rehabilitation and Nursing Home Establishment #: 25 176