

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 | 0 | Date | 09/16/2021 |
| | | No. of Repeat Risk Factor/Intervention Violations | | 0 | Time In |
| Establishment Michael's Italian Feast | License/Permit # 21 032 | Permit Holder Michael's Italian Feast LLC | | Risk Category I | |
| Street Address 605 Upper Ten Mile Creek Road | | Purpose of Inspection Routine Inspection | | | |
| City/State Germantown Hills, IL | ZIP Code 61548 | | | | |

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 | In | | |
| 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 | | | | Time/Temperature Control for Safety | | | |
| 3 | In | | | 17 | In | | |
| Management, food employee and conditional employee; knowledge, responsibilities and reporting | | | | Proper disposition of returned, previously served, reconditioned and unsafe food | | | |
| 4 | In | | | 18 | In | | |
| Proper use of restriction and exclusion | | | | Proper cooking time and temperatures | | | |
| 5 | In | | | 19 | N/O | | |
| Procedures for responding to vomiting and diarrheal events | | | | Proper reheating procedures for hot holding | | | |
| Good Hygienic Practices | | | | 20 | N/O | | |
| 6 | In | | | Proper cooling time and temperature | | | |
| Proper eating, tasting, drinking, or tobacco use | | | | 21 | In | | |
| 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 | | | | Conformance with Approved Procedures | | | |
| Good Retail Practices are preventative measures to control the addition of pathogens, chemicals, and physical objects into foods. | | | | 29 | N/A | | |
| Mark "X" in box if numbered item is not in compliance | | Mark "X" in appropriate box for COS and/or R | | Compliance with variance/specialized process/HACCP | | | |
| | | | | Safe Food and Water | | | |
| | | | | Proper Use of Utensils | | | |
| | | | | 43 | X | | X |
| | | | | 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 | X | | |
| | | | | Food and non-food contact surfaces cleanable, properly designed, constructed, and used | | | |
| | | | | 48 | X | | |
| | | | | Warewashing facilities: installed, maintained, & used; test strips | | | |
| | | | | 49 | X | | |
| | | | | 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 | X | | |
| | | | | 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

Establishment: Michael's Italian Feast

Establishment #: 21 032

Water Supply: Public Private

Waste Water System: Public Private

Sanitizer Type: Chlorine

PPM: 50/100

Heat: N/A

TEMPERATURE OBSERVATIONS

| Item/Location | Temp | Item/Location | Temp | Item/Location | Temp |
|---------------------------------|------|---------------------------------|------|-----------------------------|------|
| Meat sauce/stove burner | 166 | Turkey/cold-holding unit | 41 | Roast beef/RIC | 40 |
| Meat sauce/stove burner | 153 | Ham/cold-holding unit | 41 | Shredded cheese/RIC | 41 |
| Spaghetti meat sauce/steam unit | 140 | Sliced cheese/cold-holding unit | 41 | Lasagna/RIC | 36 |
| Au jus/steam unit | 135 | Meat sauce/WIC | 41 | Peeled hard-boiled eggs/RIC | 39 |
| Meatballs/steam unit | 135 | Ham/WIC | 41 | | |
| | | Corn/RIC | 39 | | |
| | | Blue cheese crumbles/RIC | 40 | | |
| | | Diced chicken/RIC | 38 | | |
| | | Cut lettuce/RIC | 40 | | |


OBSERVATIONS AND CORRECTIVE ACTIONS



| Item Number | Violations cited in this report must be corrected within the time frames below. |
|-------------|---|
| 37 | 3-602.11 (C) Observed in customer dining area pre-packaged ice cream containers not properly labeled. Pre-packaged in advance of retail sale shall be labeled with: 1) common name of food, 2) ingredients, 3) net quantities, 4) name and address of packager, and 5) food allergens. Please correct this violation within 90 days or at least by next routine inspection. |
| 38 | 6-202.15 (C) Observed central/main entrance door (west) to establishment with gap along interior left-side bottom of door allowing air and light to penetrate. Exterior doors shall be: 1) self-closing, 2) solid and tight fitting, 3) limited to designed use. Please correct this violation within 90 days or at least by next routine inspection. |
| 43 | 3-304.12 (C) Observed in kitchen green plastic scoop with handle in direct contact with food (dried cranberries). Store in-use utensils: 1) in the food with the handle above the top of the food item; 2) on a clean and sanitized surface. Green plastic scoop removed from cranberries and placed back into cranberries with handle extended above food by person-in-charge during inspection. |
| 47 | 4-101.19 (C) Observed right side edge of Pepsi beverage dispensing unit counter with rough surface exposed and not maintained in good repair. Non food-contact surfaces of equipment that are exposed to splash, spillage, or other food soiling or that require frequent cleaning shall be constructed of a corrosion-resistant, nonabsorbent, and smooth material. Please correct this violation within 90 days or at least by next routine inspection. |
| 48 | 4-301.13 (C) Observed in warewashing area soiled pots and buckets stored on the floor. Drainboards, utensil racks, or tables large enough to accommodate all soiled and cleaned items that may accumulate during hours of operation shall be provided for |

CFPM Verification (name, expiration date, ID#): Kevin Millard

| | | | |
|--|---|--|--|
| Kevin Millard 21557941 - NRFSP Exp. 3/2024 | Gavin Roberts 20802921 - ServSafe Exp. 7/2026 | Mary Beth Auer L2SC-3-004666 - Learn 2 Serve Exp. 9/2025 | Veronica Axelson 21631256 - NRFSP Exp. 10/2024 |
|--|---|--|--|

HACCP Topic: TCS food temperature requirements, employee health policy requirements, wearing masks


Sep 16, 2021
 Person in Charge (Signature) Date



 Inspector (Signature)

Follow-up: Yes No (Check one)

Follow-up Date: _____

