

# Inspection Report

Fulton County Health Department 700 E. Oak St. Canton, IL 61520 (309) 647-1134		No. of Risk Factor/Intervention Violations <span style="float: right;">6</span>	Date <u>09/20/2017</u> Time In <u>10:25 am</u> Time Out <u>11:25 am</u>	
		No. of Repeat Risk Factor/Intervention Violations <span style="float: right;">0</span>		
		<i>adj (91)</i> Score (optional) <span style="float: right;">90.00</span>		
Establishment SPOON RIVER VALLEY SCHOOL #4	Address 35265 N IL HWY 97	City/State LONDON MILLS, IL	Zip Code 61544	Telephone (309) 778-2201
License/Permit # PT0000214	Permit Holder	Purpose of Inspection ROUTINE INSPECTION	Est. Type	Risk Category

IN = IN COMPLIANCE OUT = OUT OF COMPLIANCE N/A = NOT APPLICABLE N/O = NOT OBSERVED COS = COMPLIED ON SITE RPT = REPEAT VIOLATION VD = VIOLATION DEGREE

### Foodborne Illness Risk Factors and Public Health Interventions

1	Compliance with Certified Manager Requirement <input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT <input type="checkbox"/> N/O <input type="checkbox"/> COS <input type="checkbox"/> RPT	0.00
<b>Employee Health</b>		
2	Proper ill practices, no ill workers present <input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT <input type="checkbox"/> N/O <input type="checkbox"/> COS <input type="checkbox"/> RPT	0.00
<b>Good Hygienic Practices</b>		
A	Good Hygienic Practices Total Points - 8 pts. <input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT <input type="checkbox"/> N/A <input type="checkbox"/> N/O <input type="checkbox"/> COS <input type="checkbox"/> RPT	0.00
3	Gloves used properly <input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT <input type="checkbox"/> N/O <input type="checkbox"/> COS <input type="checkbox"/> RPT	0.00
4	Proper eating, tasting, drinking, or tobacco use <input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT <input type="checkbox"/> N/O <input type="checkbox"/> COS <input type="checkbox"/> RPT	0.00
5	Good Personal habits and cleanliness <input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT <input type="checkbox"/> N/O <input type="checkbox"/> COS <input type="checkbox"/> RPT	0.00
<b>Preventing Contamination by Hands</b>		
B	Preventing Contamination by Hands - 9 pts. <input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT <input type="checkbox"/> N/A <input type="checkbox"/> N/O <input type="checkbox"/> COS <input type="checkbox"/> RPT	0.00
6	Hands Clean and Properly Washed <input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT <input type="checkbox"/> N/O <input type="checkbox"/> COS <input type="checkbox"/> RPT	0.00
7	No bare hand contact with RTE foods or approved alternate method properly followed <input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT <input type="checkbox"/> N/A <input type="checkbox"/> N/O <input type="checkbox"/> COS <input type="checkbox"/> RPT	0.00
8	Adequate handwashing facilities supplied & accessible <input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT <input type="checkbox"/> N/O <input type="checkbox"/> COS <input type="checkbox"/> RPT	0.00
<b>Approved Source</b>		
C	Approved Source - 9 pts. <input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT <input type="checkbox"/> N/A <input type="checkbox"/> N/O <input type="checkbox"/> COS <input type="checkbox"/> RPT	0.00
9	Food obtained from approved source <input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT <input type="checkbox"/> N/O <input type="checkbox"/> COS <input type="checkbox"/> RPT	0.00
10	Food received at proper temperature <input type="checkbox"/> IN <input type="checkbox"/> OUT <input type="checkbox"/> N/A <input checked="" type="checkbox"/> N/O <input type="checkbox"/> COS <input type="checkbox"/> RPT	0.00
11	Food in good condition, safe, & unadulterated <input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT <input type="checkbox"/> N/O <input type="checkbox"/> COS <input type="checkbox"/> RPT	0.00
12	Required records available: shellstock tags <input type="checkbox"/> IN <input type="checkbox"/> OUT <input checked="" type="checkbox"/> N/A <input type="checkbox"/> N/O <input type="checkbox"/> COS <input type="checkbox"/> RPT	0.00

Stacy Thompson Inspector

Critical Violation Form Return Date:	Follow-up:	Date: 09/20/17
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### Foodborne Illness Risk Factors and Public Health Interventions

#### Protection from Contamination

D	Protection from Contamination 9 pts.	0.00
	<input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT <input type="checkbox"/> N/A <input type="checkbox"/> N/O <input type="checkbox"/> COS <input type="checkbox"/> RPT	
13	Food separated & protected	0.00
	<input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT <input type="checkbox"/> N/A <input type="checkbox"/> N/O <input type="checkbox"/> COS <input type="checkbox"/> RPT	
14	Food-contact surfaces: cleaned & sanitized	0.00
	<input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT <input type="checkbox"/> N/A <input type="checkbox"/> N/O <input type="checkbox"/> COS <input type="checkbox"/> RPT	
15	Proper disposition of returned, previously served, reconditioned, & unsafe food	0.00
	<input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT <input type="checkbox"/> N/A <input type="checkbox"/> N/O <input type="checkbox"/> COS <input type="checkbox"/> RPT	

#### Potentially Hazardous Food Time/Temperature

E	Potentially Hazardous Food Time/Temp - 9 pts.	9.00
	<input type="checkbox"/> IN <input checked="" type="checkbox"/> OUT <input type="checkbox"/> N/A <input type="checkbox"/> N/O <input type="checkbox"/> COS <input type="checkbox"/> RPT	
16	Proper cooking time & temperatures	0.00
	<input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT <input type="checkbox"/> N/A <input type="checkbox"/> N/O <input type="checkbox"/> COS <input type="checkbox"/> RPT	
17	Proper reheating procedures for hot holding	0.00
	<input type="checkbox"/> IN <input type="checkbox"/> OUT <input type="checkbox"/> N/A <input checked="" type="checkbox"/> N/O <input type="checkbox"/> COS <input type="checkbox"/> RPT	
18	Proper cooling time & temperatures	0.00
	<input type="checkbox"/> IN <input type="checkbox"/> OUT <input type="checkbox"/> N/A <input checked="" type="checkbox"/> N/O <input type="checkbox"/> COS <input type="checkbox"/> RPT	
19	Proper hot holding temperatures	0.00
	<input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT <input type="checkbox"/> N/A <input type="checkbox"/> N/O <input type="checkbox"/> COS <input type="checkbox"/> RPT	
20	Proper cold holding temperatures	0.00
	<input type="checkbox"/> IN <input checked="" type="checkbox"/> OUT <input type="checkbox"/> N/A <input type="checkbox"/> N/O <input type="checkbox"/> COS <input type="checkbox"/> RPT	
	<b>Violation Comments:</b> Provide proper cold holding temperatures. Walk-in cooler air (45-47° F) and food temperatures (44-45° F) were elevated during inspection. Staff is in and out of the cooler frequently during food preparation, and unit had just finished a defrost cycle. According to maintenance staff, those factors plus the high humidity weather today are making it difficult for the cooler to maintain temperature. Cold TCS foods must be held at 4° F or colder to help prevent bacterial growth. Discard any TCS foods that have been above 4° F for 4 hours or more, and move remaining foods to another cooler. Have walk in serviced.	
21	Proper date marking & disposition	0.00
	<input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT <input type="checkbox"/> N/A <input type="checkbox"/> N/O <input type="checkbox"/> COS <input type="checkbox"/> RPT	
22	Time as a public health control: procedures & records	0.00
	<input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT <input type="checkbox"/> N/A <input type="checkbox"/> N/O <input type="checkbox"/> COS <input type="checkbox"/> RPT	

#### Consumer Advisory

23	Consumer advisory provided for raw or undercooked foods	0.00
	<input type="checkbox"/> IN <input type="checkbox"/> OUT <input checked="" type="checkbox"/> N/A <input type="checkbox"/> N/O <input type="checkbox"/> COS <input type="checkbox"/> RPT	

#### Highly Susceptible Populations

24	Pasteurized foods used, prohibited foods not offered	0.00
	<input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT <input type="checkbox"/> N/A <input type="checkbox"/> N/O <input type="checkbox"/> COS <input type="checkbox"/> RPT	

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## Foodborne Illness Risk Factors and Public Health Interventions

### Chemical

<b>F</b>	Chemicals - 9 pts. <input type="checkbox"/> IN <input type="checkbox"/> OUT <input type="checkbox"/> N/A <input type="checkbox"/> N/O <input type="checkbox"/> COS <input type="checkbox"/> RPT	0.00
25	Food Additives: approved and properly used <input type="checkbox"/> IN <input type="checkbox"/> OUT <input type="checkbox"/> N/A <input type="checkbox"/> N/O <input type="checkbox"/> COS <input type="checkbox"/> RPT	0.00
26	Toxic substances properly identified, stored, and used <input type="checkbox"/> IN <input type="checkbox"/> OUT <input type="checkbox"/> N/A <input type="checkbox"/> N/O <input type="checkbox"/> COS <input type="checkbox"/> RPT	0.00

### Conformance with Approved Procedures

<b>27</b>	Compliance with variance, specialized process, and HACCP plan <input type="checkbox"/> IN <input type="checkbox"/> OUT <input type="checkbox"/> N/A <input type="checkbox"/> N/O <input type="checkbox"/> COS <input type="checkbox"/> RPT	0.00
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### Good Retail Practices

#### Safe Food and Water

<b>G</b>	Safe Food and Water - 3 pts. <input type="checkbox"/> IN <input type="checkbox"/> OUT <input type="checkbox"/> N/A <input type="checkbox"/> N/O <input type="checkbox"/> COS <input type="checkbox"/> RPT	0.00
28	Egg and Egg products properly used <input type="checkbox"/> IN <input type="checkbox"/> OUT <input type="checkbox"/> N/A <input type="checkbox"/> N/O <input type="checkbox"/> COS <input type="checkbox"/> RPT	0.00
29	Water and ice from approved source <input type="checkbox"/> IN <input type="checkbox"/> OUT <input type="checkbox"/> N/A <input type="checkbox"/> N/O <input type="checkbox"/> COS <input type="checkbox"/> RPT	0.00
30	Variance obtained for specialized processing methods <input type="checkbox"/> IN <input type="checkbox"/> OUT <input type="checkbox"/> N/A <input type="checkbox"/> N/O <input type="checkbox"/> COS <input type="checkbox"/> RPT	0.00

### Food Temperature Control

<b>H</b>	Food Temperature Control - 3 pts. <input type="checkbox"/> IN <input type="checkbox"/> OUT <input type="checkbox"/> N/A <input type="checkbox"/> N/O <input type="checkbox"/> COS <input type="checkbox"/> RPT	0.00
31	Proper cooling methods used and adequate equipment for temperature control <input type="checkbox"/> IN <input type="checkbox"/> OUT <input type="checkbox"/> N/A <input type="checkbox"/> N/O <input type="checkbox"/> COS <input type="checkbox"/> RPT	0.00
32	Plant food properly cooked for hot holding <input type="checkbox"/> IN <input type="checkbox"/> OUT <input type="checkbox"/> N/A <input type="checkbox"/> N/O <input type="checkbox"/> COS <input type="checkbox"/> RPT	0.00
33	Approved thawing methods used <input type="checkbox"/> IN <input type="checkbox"/> OUT <input type="checkbox"/> N/A <input type="checkbox"/> N/O <input type="checkbox"/> COS <input type="checkbox"/> RPT	0.00
34	Thermometers provided and accurate <input type="checkbox"/> IN <input type="checkbox"/> OUT <input type="checkbox"/> N/A <input type="checkbox"/> N/O <input type="checkbox"/> COS <input type="checkbox"/> RPT	0.00

### Food Identification

<b>35</b>	Food properly labeled; original container <input type="checkbox"/> IN <input type="checkbox"/> OUT <input type="checkbox"/> N/A <input type="checkbox"/> N/O <input type="checkbox"/> COS <input type="checkbox"/> RPT	0.00
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### Prevention of Food Contamination

<b>I</b>	Prevention of Food Contamination - 3 pts. <input type="checkbox"/> IN <input type="checkbox"/> OUT <input type="checkbox"/> N/A <input type="checkbox"/> N/O <input type="checkbox"/> COS <input type="checkbox"/> RPT	0.00
36	Insects, rodents, and animals not present, and no unauthorized persons <input type="checkbox"/> IN <input type="checkbox"/> OUT <input type="checkbox"/> N/A <input type="checkbox"/> N/O <input type="checkbox"/> COS <input type="checkbox"/> RPT	0.00

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37	Contamination prevented during food preparation, storage, and display	0.00
	<input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT <input type="checkbox"/> N/O <input type="checkbox"/> COS <input type="checkbox"/> RPT	
38	Food products properly prepared and stored	0.00
	<input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT <input type="checkbox"/> N/O <input type="checkbox"/> COS <input type="checkbox"/> RPT	
39	Wiping cloths: properly used and stored	0.00
	<input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT <input type="checkbox"/> N/O <input type="checkbox"/> COS <input type="checkbox"/> RPT	
40	Washing fruits and vegetables	0.00
	<input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT <input type="checkbox"/> N/O <input type="checkbox"/> COS <input type="checkbox"/> RPT	

### Proper Use of Utensils

J	Proper Use of Utensils - 1 pt.	1.00
	<input type="checkbox"/> IN <input checked="" type="checkbox"/> OUT <input type="checkbox"/> N/A <input type="checkbox"/> N/O <input type="checkbox"/> COS <input type="checkbox"/> RPT	
41	In-use utensils: properly stored	0.00
	<input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT <input type="checkbox"/> N/O <input type="checkbox"/> COS <input type="checkbox"/> RPT	
42	Utensils, equipment and linens: properly stored, dried, and handled	0.00
	<input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT <input type="checkbox"/> N/O <input type="checkbox"/> COS <input type="checkbox"/> RPT	
43	Single-use and single service articles: properly stored and used	0.00
	<input type="checkbox"/> IN <input checked="" type="checkbox"/> OUT <input type="checkbox"/> N/O <input checked="" type="checkbox"/> COS <input type="checkbox"/> RPT	
	<b>Violation Comments:</b> <span style="float: right; font-size: 2em; margin-left: 20px;">H</span> Provide for proper storage and use of single-use and single-service articles. Rack of plastic spoons observed with food-contact surface up. Arrange with handles up to prevent touching the food contact surfaces. Corrected.	
44	Food contact surfaces clean	0.00
	<input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT <input type="checkbox"/> N/O <input type="checkbox"/> COS <input type="checkbox"/> RPT	

### Utensils, Equipment and Vending

K	Utensils, Equipment and Vending - 1 pt.	0.00
	<input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT <input type="checkbox"/> N/A <input type="checkbox"/> N/O <input type="checkbox"/> COS <input type="checkbox"/> RPT	
45	Food and non-food contact surfaces cleanable, properly designed, constructed, and used	0.00
	<input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT <input type="checkbox"/> N/O <input type="checkbox"/> COS <input type="checkbox"/> RPT	
	<b>Violation Comments:</b> Shelves in elementary school fridge have been replaced, and look much better.	
46	Warewashing facilities: installed, maintained, and used; test strips	0.00
	<input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT <input type="checkbox"/> N/O <input type="checkbox"/> COS <input type="checkbox"/> RPT	
47	Non-food contact surfaces clean	0.00
	<input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT <input type="checkbox"/> N/O <input type="checkbox"/> COS <input type="checkbox"/> RPT	

### Physical Facilities

L	Physical Facilities - 3 pts.	0.00
	<input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT <input type="checkbox"/> N/A <input type="checkbox"/> N/O <input type="checkbox"/> COS <input type="checkbox"/> RPT	
48	Hot and cold water available; adequate pressure	0.00
	<input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT <input type="checkbox"/> N/O <input type="checkbox"/> COS <input type="checkbox"/> RPT	

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