

# 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	1	Date	05/06/2019
		No. of Repeat Risk Factor/Intervention Violations		0	Time In
Establishment	License/Permit #	Permit Holder		Risk Category	
Cornerstone Family Restaurant	19 115	Cornerstone Family Restaurant Inc		1	
Street Address		Purpose of Inspection			
1101 W. Center Street		Routine Inspection			
City/State	ZIP Code				
Eureka, IL	61530				

## 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
<b>Supervision</b>					<b>Protection from Contamination</b>				
1	In	Person in charge present, demonstrates knowledge, and performs duties			15	In	Food separated and protected		
2	In	Certified Food Protection Manager (CFPM)			16	In	Food-contact surfaces; cleaned and sanitized		
<b>Employee Health</b>					<b>Time/Temperature Control for Safety</b>				
3	In	Management, food employee and conditional employee; knowledge, responsibilities and reporting			17	In	Proper disposition of returned, previously served, reconditioned and unsafe food		
4	In	Proper use of restriction and exclusion			18	In	Proper cooking time and temperatures		
5	In	Procedures for responding to vomiting and diarrhea events			19	In	Proper reheating procedures for hot holding		
<b>Good Hygienic Practices</b>					<b>Consumer Advisory</b>				
6	In	Proper eating, tasting, drinking, or tobacco use			20	In	Proper cooling time and temperature		
7	In	No discharge from eyes, nose, and mouth			21	In	Proper hot holding temperatures		
<b>Preventing Contamination by Hands</b>					<b>Highly Susceptible Populations</b>				
8	In	Hands clean and properly washed			22	In	Proper cold holding temperatures		
9	In	No bare hand contact with RTE food or a pre-approved alternative procedure properly allowed			23	Out	Proper date marking and disposition		X
10	In	Adequate handwashing sinks properly supplied and accessible			24	N/A	Time as a Public Health Control; procedures & records		
<b>Approved Source</b>					<b>Food/Color Additives and Toxic Substances</b>				
11	In	Food obtained from approved source			25	In	Consumer advisory provided for raw/undercooked food		
12	N/O	Food received at proper temperature			<b>Conformance with Approved Procedures</b>				
13	In	Food in good condition, safe, and unadulterated			26	N/A	Pasteurized foods used; prohibited foods not offered		
14	N/A	Required records available: shellstock tags, parasite destruction			27	N/A	Food additives; approved and properly used		
					28	In	Toxic substances properly identified, stored, and used		
					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	Compliance Status			COS	R
<b>Safe Food and Water</b>					<b>Proper Use of Utensils</b>				
30		Pasteurized eggs used where required			43		In-use utensils; properly stored		
31		Water and ice from approved source			44		Utensils, equipment & linens; properly stored, dried, & handled		
32		Variance obtained for specialized processing methods			45	X	Single-use/single-service articles; properly stored and used		X
<b>Food Temperature Control</b>					<b>Utensils, Equipment and Vending</b>				
33		Proper cooling methods used; adequate equipment for temperature control			46		Gloves used properly		
34		Plant food properly cooked for hot holding			<b>Physical Facilities</b>				
35		Approved thawing methods used			47	X	Food and non-food contact surfaces cleanable, properly designed, constructed, and used		
36	X	Thermometers provided & accurate		X	48		Warewashing facilities; installed, maintained, & used; test strips		
<b>Food Identification</b>					<b>Employee Training</b>				
37		Food properly labeled; original container			49	X	Non-food contact surfaces clean		
<b>Prevention of Food Contamination</b>					50		Hot and cold water available; adequate pressure		
38		Insects, rodents, and animals not present			51		Plumbing installed; proper backflow devices		
39		Contamination prevented during food preparation, storage and display			52		Sewage and waste water properly disposed		
40		Personal cleanliness			53		Toilet facilities; properly constructed, supplied, & cleaned		
41		Wiping cloths; properly used and stored			54		Garbage & refuse properly disposed; facilities maintained		
42		Washing fruits and vegetables			55		Physical facilities installed, maintained, and clean		
					56		Adequate ventilation and lighting; designated areas used		
					57		All food employees have food handler training		
					58	X	Allergen training as required		

# Food Establishment Inspection Report

Establishment: Cornerstone Family Restaurant

Establishment #: 19 115

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
Chili/soup urn	176	Brown gravy/steam table	140	Pasta/cooling down	88
Broccoli-cheese soup/soup urn	186	Roast beef/steam table	159	Pea salad/cooling down	44
Omelet/griddle	151	Chicken tenders/fryer	173	Ground sausage/WIC	38
Ham/griddle	170	Egg salad/RIC	40	Chicken salad/WIC	36
Sausage gravy/steam table	139	Diced ham/RIC	38	Spaghetti meat sauce/WIC	39
Taco meat/steam table	170	Sliced tomatoes/RIC	40	Diced tomatoes/WIC	38
Pepper gravy/steam table	145	Ground sausage/RIC	40	Pasta salad/WIC	39
Spaghetti meat sauce/steam table	143	Cut lettuce/RIC	41	Milk/WIC	38
Mashed potatoes/steam table	141	Pancake batter/RIC	38	Cottage cheese/salad bar	39

### OBSERVATIONS AND CORRECTIVE ACTIONS

Item Number	Violations cited in this report must be corrected within the time frames below.
23	3-501.18 (P) Observed in RIC (cook line) meatloaf on plate with preparation date of 4-24-19, which does not meet 7-day date-marking requirements. Discussed HACCP concept with male person-in-charge and male food employee during inspection. Meatloaf discarded by male food employee during inspection.
36	4-204.112 (C) Observed in RIF (True, 2-door, cook line) and in RIF (True, 1-door, fish) temperature measuring device not provided and conspicuous. Thermometers provided in RIFs by male food employee during inspection.
45	4-903.11 (C) Observed in wait staff area by kitchen cabinet scissors stored directly in uncovered coffee filter. Scissors removed from coffee filter and top coffee filter discarded by female food employee during inspection.
47	4-201.11 (C) Observed in warewashing area red tongs on clean utensil shelf with grip handle of red tongs cracked and damaged. Grip handle removed from red tongs by male person-in-charge during inspection. Red tongs removed for warewashing by male person-in-charge during inspection.
47	4-201.11 (C) Observed in RIF (True, 2-door, cook line) two (2) plastic containers of food products (breadsticks and chicken tenders) with cracked and damaged surfaces of plastic containers. Please correct this violation within 90 days or at least by next routine inspection.
47	4-501.12 (C) Observed in food prep area gray cutting board with crevices, knife grooves, and rough surface, which prevents proper cleaning and sanitizing to prevent pathogenic microorganism transmission. Please correct this violation within 90 days or at least by next routine inspection.

CFPM Verification (name, expiration date, ID#): Michael Sweeney

Michael Sweeney 21083019 - NRFSP Exp. 3/2020	Donna Hamilton-Sweeney 108913 - IL FSSMC Exp. 10/2019	Tonya Hallam 21394999 - NRFSP Exp. 10/2022	Zachariah Harper 21321953 - NRFSP Exp. 3/2022
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HACCP Topic: TCS food date-marking requirements, Hepatitis A

*Mike Sweeney*  
 Person in Charge (Signature)

May 6, 2019  
 Date

*Paul Wilbermann* (EL)  
 Inspector (Signature)

Follow-up:  Yes  No (Check one)

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

