

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	2	Date	09/26/2019
		No. of Repeat Risk Factor/Intervention Violations		0	Time In
Establishment Fairlakes Golf Club	License/Permit # 19 139	Permit Holder Fairlakes Golf Club Inc		Risk Category II	
Street Address 2203 County Road 600 N		Purpose of Inspection Routine Inspection			
City/State Secor, IL	ZIP Code 61771				

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	
Supervision			
1	In		Person in charge present, demonstrates knowledge, and performs duties
2	Out		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 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	Out		Adequate handwashing sinks properly supplied and accessible <input checked="" type="checkbox"/>
Approved Source			
11	In		Food obtained from approved source
12	N/O		Food received at proper temperature
13	In		Food in good condition, safe, and unadulterated
14	N/A		Required records available: shellstock tags, parasite destruction

Compliance Status	COS	R	
Protection from Contamination			
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
Time/Temperature Control for Safety			
18	N/O		Proper cooking time and temperatures
19	N/A		Proper reheating procedures for hot holding
20	N/A		Proper cooling time and temperature
21	N/O		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 & records
Consumer Advisory			
25	In		Consumer advisory provided for raw/undercooked food
Highly Susceptible Populations			
26	N/A		Pasteurized foods used; prohibited foods not offered
Food/Color Additives and Toxic Substances			
27	N/A		Food additives: approved and properly used
28	In		Toxic substances 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 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

	COS	R
Safe Food and Water		
30		
31		
32		
Food Temperature Control		
33		
34		
35		
36		
Food Identification		
37		
Prevention of Food Contamination		
38		
39		
40		
41		
42		

	COS	R
Proper Use of Utensils		
43		
44		
45		
46		
Utensils, Equipment and Vending		
47		
48		
49		
Physical Facilities		
50		
51		
52		
53		
54		
55		
56		
Employee Training		
57		
58		

Food Establishment Inspection Report

Establishment: Fairlakes Golf Club

Establishment #: 19 139

Water Supply: Public Private

Waste Water System: Public Private

Sanitizer Type: Chlorine

PPM: 50-99/100

Heat: N/A

TEMPERATURE OBSERVATIONS							
Item/Location	Temp		Item/Location	Temp		Item/Location	Temp
			Hot dogs/RIC	38		RIC/kitchen	36
			Sliced ham/RIC	39		RIF/kitchen	0
			Sliced cheese/RIC	40			
			Chicken salad/RIC	37			
			Turkey/RIC	39			
			Potato salad/RIC	38			

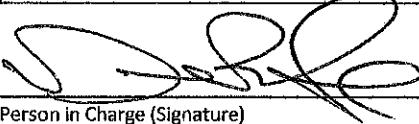
OBSERVATIONS AND CORRECTIVE ACTIONS

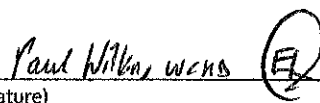
Item Number	Violations cited in this report must be corrected within the time frames below.
2	2-102.12 (C) Observed documentation that only the male person-in-charge has current certified food protection manager certification. This facility is classified as a Category II food establishment, and the person-in-charge must have current CFPM or IL FSSMC certification and be on the premises during all hours of operation. Provide an adequate number of staff with approved CFPM certification to ensure that the person-in-charge has CFPM certification and is on the premises during all hours of operation. Please correct this violation within 90 days or at least by next routine inspection.
10	6-301.14 (C) Observed a sign or poster that notifies food employees to wash their hands is not provided at handwashing sinks used by food employees at bar/kitchen and in restrooms. Hand washing signs provided and posted during inspection.
45	4-903.11 (C) Observed in middle hallway between bar and kitchen two (2) bags of plastic cups stored directly on floor by soda syrup boxes and across from hand sink. Single-service articles shall be stored at least 15 cm (6 inches) above the floor. Bags of plastic cups removed to top of soda syrup boxes by male person-in-charge during inspection.
47	4-101.19 (C) Observed in kitchen on slotted shelf clean forks stored in cracked and damaged plastic Sterilite containers. Non food-contact surfaces of equipment 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.

CFPM Verification (name, expiration date, ID#): David Rife

David Rife 21049818 - NRFSP Exp. 12/2019			
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HACCP Topic: TCS food temperature requirements, employee health policy requirements, Hepatitis A


Sep 26, 2019
 Person in Charge (Signature) Date


 Paul Wilton, Wrens (F)

 Follow-up: Yes No (Check one) Follow-up Date: _____

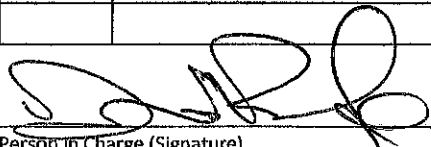
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Establishment: Fairlakes Golf Club

Establishment #: 19 139


OBSERVATIONS AND CORRECTIVE ACTIONS

Item Number	Violations cited in this report must be corrected within the time frames below.
	Please correct any core (C) violations noted above ASAP but at least by next routine inspection
	Please go to our website to view/print the WCHD Connection quarterly newsletter
	Facility is still classified as a Category II food establishment. If facility chooses to cool down TCS food and/or reheat TCS food, this facility will be re-classified as a Category I food establishment.
	Effective January 1, 2019, the person-in-charge must have CFPM or IL FSSMC certification and be on the premises during all hours of operation.
	Please note that if establishment or group fundraiser is cooking/preparing/serving food outside of kitchen facility (concessions, grill, barbeque, steak-fry, cook-out, etc.), a temporary food/drink permit must be applied for & approved by WCHD.
	If any changes (menu, equipment, remodeling, ownership, etc.) are planned in the future for this establishment, please contact WCHD prior to changes occurring for plan review and to ensure compliance.
	WCHD provides free food safety in-services to establishments & their staff
	Next certified food protection manager 8-hour class & exam at WCHD: October 2019
	Effective January 1, 2017, Food Handler certification is required for all food employees who do not already have CFPM or IL FSSMC certification. "Food employee" means an individual working with unpackaged food, food equipment or utensils, or food-contact surfaces. Food handler certification is required 30 days from the hire date of food employees.
	Ensure compliance with Smoke-Free IL Act - public places and places of employment must be completely smoke-free inside and within 15 feet from entrances, exits, windows that open and ventilation intakes; signage posted at entrances & exits; no vaping or e-cigarette use in food & drink prep area, dishwashing area, and storage area; no smoking within building structure.
	This facility is on the NCPWS program and must routinely collect water samples as required
	Make sure exterior bagged ice (Home City Ice) freezer is kept locked at all times except when in use for food safety


Person in Charge (Signature)

Sep 26, 2019

Date


Inspector (Signature)

Follow-up: Yes No (Check one)

Follow-up Date: _____