

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	03/11/2020
		No. of Repeat Risk Factor/Intervention Violations	0	Time In	8:55 AM
Establishment Designer Cake Shop	License/Permit # 20 095	Permit Holder Linda Veatch	Risk Category II		
Street Address 1734 County Road 1800 E		Purpose of Inspection Routine Inspection			
City/State Roanoke, IL	ZIP Code 61561				

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				17	In		
3	In			Proper disposition of returned, previously served, reconditioned and unsafe food			
Management, food employee and conditional employee; knowledge, responsibilities and reporting				Time/Temperature Control for Safety			
4	In			18	N/O		
Proper use of restriction and exclusion				Proper cooking time and temperatures			
5	In			19	N/A		
Procedures for responding to vomiting and diarrheal events				Proper reheating procedures for hot holding			
Good Hygienic Practices				20	N/A		
6	In			Proper cooling time and temperature			
Proper eating, tasting, drinking, or tobacco use				21	N/A		
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				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			COS	R
Safe Food and Water				Proper Use of Utensils			
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	Single-use/single-service articles: properly stored and used		
Food Temperature Control				46	Gloves used properly		
33	Proper cooling methods used; adequate equipment for temperature control			Utensils, Equipment and Vending			
34	Plant food properly cooked for hot holding			47	Food and non-food contact surfaces cleanable, properly designed, constructed, and used		
35	Approved thawing methods used			48	Warewashing facilities: installed, maintained, & used; test strips		
36	Thermometers provided & accurate			49	Non-food contact surfaces clean		
Food Identification				Physical Facilities			
37	Food properly labeled; original container			50	Hot and cold water available; adequate pressure		
Prevention of Food Contamination				51	Plumbing installed; proper backflow devices		
38	Insects, rodents, and animals not present			52	Sewage and waste water properly disposed		
39	Contamination prevented during food preparation, storage and display			53	Toilet facilities: properly constructed, supplied, & cleaned		
40	Personal cleanliness			54	Garbage & refuse properly disposed; facilities maintained		
41	Wiping cloths: properly used and stored			55	Physical facilities installed, maintained, and clean		
42	Washing fruits and vegetables			56	Adequate ventilation and lighting; designated areas used		
Employee Training				Employee Training			
57	All food employees have food handler training			57	All food employees have food handler training		
58	Allergen training as required			58	Allergen training as required		

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Establishment: Designer Cake Shop

Establishment #: 20 095

Water Supply: Public Private Waste Water System: Public Private

Sanitizer Type: Quaternary ammonium PPM: 200 Heat: N/A

TEMPERATURE OBSERVATIONS								
Item/Location		Temp	Item/Location		Temp	Item/Location		Temp
						RIF/kitchen	0	
						RIF/kitchen	-2	
						RIC/kitchen	36	
						RIF/kitchen	-20	

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.

CFPM Verification (name, expiration date, ID#): Linda Veatch

Linda Veatch 21143595 - NRFSP Exp. 9/2020			
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HACCP Topic: TCS food storage temperature requirements, bare hand contact with ready-to-eat food, allergy signage

Linda Veatch Mar 11, 2020
Person in Charge (Signature) Date

Paul Wilkins Follow-up: Yes No (Check one) Follow-up Date: _____
Inspector (Signature)

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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 and other food safety information

Facility is still classified as a Category II food establishment

The person-in-charge must have CFPM or IL FSSM 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.

WCHD provides free food safety in-services to establishments & their staff

Next certified food protection manager 8-hour class & exam at WCHD: Fall 2020

Food handler certification is required for all food employees who do not already have CFPM or IL FSSM 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.

Please collect a water sample at least once a year to ensure a potable/safe water supply

If this facility serves more than 25 people more than 60 days per year, the water well serving this facility shall participate in the NCPWS program.

Restrooms are located within 300 feet of the kitchen facility

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Person in Charge (Signature)

Mar 11, 2020

Date

Paul William Wain

Inspector (Signature)

Follow-up: Yes No (Check one)

Follow-up Date: _____