

Food Establishment Inspection Report

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|--|----------------------------|---|----------------------|---------|------------|
| 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 | 10/01/2021 |
| | | No. of Repeat Risk Factor/Intervention Violations | 0 | Time In | 9:45 AM |
| Establishment CVS #6458 | License/Permit # 21 054 | Permit Holder Highland Park CVS LLC | Risk Category III | | |
| Street Address 501 W. Center Street | | Purpose of Inspection Routine Inspection | | | |
| City/State Eureka, IL | ZIP Code 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 |
|---|-----|-----|---|--|-----|-----|---|
| Supervision | | | | Protection from Contamination | | | |
| 1 | In | | | 15 | N/A | | |
| Person in charge present, demonstrates knowledge, and performs duties | | | | Food separated and protected | | | |
| 2 | N/A | | | 16 | N/A | | |
| 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/A | | |
| 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 | N/A | | | 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 | | | |
| | | | | 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 |
|---|--|-----|---|---|--|-----|---|
| Safe Food and Water | | | | Proper Use of Utensils | | | |
| 30 | | | | 43 | In-use utensils: properly stored | | |
| Pasteurized eggs used where required | | | | Utensils, equipment & linens: properly stored, dried, & handled | | | |
| 31 | | | | 45 | Single-use/single-service articles: properly stored and used | | |
| Water and ice from approved source | | | | 46 | Gloves used properly | | |
| 32 | | | | Utensils, Equipment and Vending | | | |
| Variance obtained for specialized processing methods | | | | 47 | Food and non-food contact surfaces cleanable, properly designed, constructed, and used | | |
| Food Temperature Control | | | | 48 | Warewashing facilities: installed, maintained, & used; test strips | | |
| 33 | | | | 49 | Non-food contact surfaces clean | | |
| Proper cooling methods used; adequate equipment for temperature control | | | | Physical Facilities | | | |
| 34 | | | | 50 | Hot and cold water available; adequate pressure | | |
| Plant food properly cooked for hot holding | | | | 51 | Plumbing installed; proper backflow devices | | |
| 35 | | | | 52 | Sewage and waste water properly disposed | | |
| Approved thawing methods used | | | | 53 | Toilet facilities: properly constructed, supplied, & cleaned | | |
| 36 | | | | 54 | Garbage & refuse properly disposed; facilities maintained | | |
| Thermometers provided & accurate | | | | 55 | Physical facilities installed, maintained, and clean | | |
| Food Identification | | | | 56 | Adequate ventilation and lighting; designated areas used | | |
| 37 | | | | Employee Training | | | |
| Food properly labeled; original container | | | | 57 | All food employees have food handler training | | |
| Prevention of Food Contamination | | | | 58 | Allergen training as required | | |
| 38 | | | | | | | |
| Insects, rodents, and animals not present | | | | | | | |
| 39 | | | | | | | |
| Contamination prevented during food preparation, storage and display | | | | | | | |
| 40 | | | | | | | |
| Personal cleanliness | | | | | | | |
| 41 | | | | | | | |
| Wiping cloths: properly used and stored | | | | | | | |
| 42 | | | | | | | |
| Washing fruits and vegetables | | | | | | | |

Food Establishment Inspection Report

Establishment: CVS #6458

Establishment #: 21 054

Water Supply: Public Private

Waste Water System: Public Private

Sanitizer Type: Chlorine

PPM: 100

Heat: N/A

TEMPERATURE OBSERVATIONS

| Item/Location | Temp | Item/Location | Temp | Item/Location | Temp |
|---------------|------|---------------|------|---------------|------|
| | | Milk/RIC | 36 | | |
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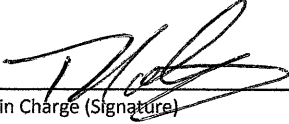
OBSERVATIONS AND CORRECTIVE ACTIONS


| Item Number | |
|-------------|---|
| | Violations cited in this report must be corrected within the time frames below. |
| | No violations observed at time of inspection. |
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CFPM Verification (name, expiration date, ID#): Tim Railey

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


Person in Charge (Signature) _____ Date Oct 1, 2021

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

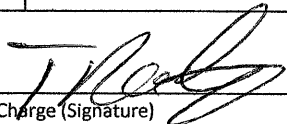
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| Item Number | Violations cited in this report must be corrected within the time frames below. |
|-------------|--|
| | Please correct any core (C) violations ASAP but at least by next routine inspection |
| | Please go to our website to view/print the WCHD Connection quarterly newsletter and other food safety information |
| | Facility is still classified as a Category III food establishment |
| | Please note if establishment or group fundraiser is cooking/preparing/serving food outside of kitchen facility (grill, barbeque, steak-fry, cook-out, etc.), a temporary food/drink permit must be applied for & approved by WCHD. |
| | Please note that 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: Spring 2022 |
| | 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. |
| | If any events occur that cause damage to the establishment (flood, water damage, fire, power outage, etc.), please contact the WCHD to ensure compliance so that required inspections occur prior to re-opening. |
| | Please follow all current COVID-19 guidelines and recommendations - wear masks, social distancing, employee health, etc. |
| | Employees wearing masks at time of inspection |
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 Person in Charge (Signature)

Oct 1, 2021

 Date



 Inspector (Signature)

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