

# Montgomery County Health Department

11191 Illinois Route 185  
Hillsboro IL 62049

Division of Environmental Health  
(217) 532-2001

## Retail Food Sanitary Inspection Report

Establishment <b>Holiday Inn Express</b>	Permit# <b>28517</b>	Date <b>6-13-18</b>	Grade <b>A</b>	Score (100 - demerits) <b>100</b>
Address <b># 4 Thunderbird Circle</b>	Establishment Code <b>01</b>	Risk <b>2</b>	Time in <b>9:15am</b>	
City <b>Litchfield IL</b>	State <b>IL</b>	Zip <b>62056</b>	Phone Number <b>(217) 324-4556</b>	Time out <b>10:00 am</b>
Owner/Agent <b>Jane Martin</b>	Compliant with the Smoke-Free Illinois Act? <b>(YES) NO (circle one)</b>			

Purpose of Inspection (circle one) **Routine** Follow-up Pre-opening Smoking Complaint Educational Other

### FOODBORNE ILLNESS RISK FACTORS AND PUBLIC HEALTH INTERVENTIONS

Circle designated compliance status (IN, OUT, N/O, N/A) for each numbered item Mark "X" in appropriate box for C and/or R

IN=in compliance OUT=out of compliance N/O=not observed N/A=not applicable C=corrected on-site during inspection R=repeat violation (2X demerits)

Compliance Status	Description	Points	C	R
<b>Demonstration of Knowledge 5 points</b>				
<b>1</b> <input checked="" type="radio"/> IN <input type="radio"/> OUT <input type="radio"/> N/A	Compliance with Certified Manager Requirement			
<b>Employee Health 5 points</b>				
<b>2</b> <input checked="" type="radio"/> IN <input type="radio"/> OUT	Employee health policy and procedures			
<b>Good Hygienic Practices 6 points</b>				
<b>3</b> <input checked="" type="radio"/> IN <input type="radio"/> OUT <input type="radio"/> NA <input type="radio"/> NO	Proper glove use			
<b>4</b> <input checked="" type="radio"/> IN <input type="radio"/> OUT <input checked="" type="radio"/> NO	Proper eating, tasting, drinking, tobacco use			
<b>5</b> <input checked="" type="radio"/> IN <input type="radio"/> OUT <input type="radio"/> NO	Personal hygiene and cleanliness			
<b>Preventing Contamination by Hands 8 points</b>				
<b>6</b> <input checked="" type="radio"/> IN <input type="radio"/> OUT <input type="radio"/> NO	Hands clean, handwashing procedures			
<b>7</b> <input checked="" type="radio"/> IN <input type="radio"/> OUT <input type="radio"/> N/A <input type="radio"/> NO	No bare hand contact with RTE foods			
<b>8</b> <input checked="" type="radio"/> IN <input type="radio"/> OUT	Adequate handwashing facilities supplied & accessible			
<b>Approved Source 5 points</b>				
<b>9</b> <input checked="" type="radio"/> IN <input type="radio"/> OUT	Food obtained from approved source			
<b>10</b> <input checked="" type="radio"/> IN <input type="radio"/> OUT <input type="radio"/> N/A <input checked="" type="radio"/> NO	Food received at proper temperature			
<b>11</b> <input checked="" type="radio"/> IN <input type="radio"/> OUT	Food in good condition, safe, unadulterated			
<b>12</b> <input checked="" type="radio"/> IN <input type="radio"/> OUT <input checked="" type="radio"/> N/A	Required records available; shellstock tags			
<b>Protection from Contamination 6 points</b>				
<b>13</b> <input checked="" type="radio"/> IN <input type="radio"/> OUT <input type="radio"/> N/A	Food separated & protected			
<b>14</b> <input checked="" type="radio"/> IN <input type="radio"/> OUT <input type="radio"/> N/A	Food contact surfaces clean & sanitized			
<b>15</b> <input checked="" type="radio"/> IN <input type="radio"/> OUT	No re-use of foods or single service previously served			

  

Compliance Status	Description	Points	C	R
<b>Potentially Hazardous Food Time/Temperature 9 points</b>				
<b>16</b> <input checked="" type="radio"/> IN <input type="radio"/> OUT <input type="radio"/> N/A <input type="radio"/> NO	Proper cooking time & temperature			
<b>17</b> <input checked="" type="radio"/> IN <input type="radio"/> OUT <input type="radio"/> N/A <input type="radio"/> NO	Proper reheating procedures for hot holding			
<b>18</b> <input checked="" type="radio"/> IN <input type="radio"/> OUT <input checked="" type="radio"/> N/A <input type="radio"/> NO	Proper cooling time & temperature			
<b>19</b> <input checked="" type="radio"/> IN <input type="radio"/> OUT <input type="radio"/> N/A <input type="radio"/> NO	Proper hot holding temperature			
<b>20</b> <input checked="" type="radio"/> IN <input type="radio"/> OUT <input type="radio"/> N/A	Proper cold holding temperature			
<b>21</b> <input checked="" type="radio"/> IN <input type="radio"/> OUT <input type="radio"/> N/A <input type="radio"/> NO	Proper date marking & disposition of PHF			
<b>22</b> <input checked="" type="radio"/> IN <input type="radio"/> OUT <input type="radio"/> N/A <input type="radio"/> NO	Time as a public health control: approved procedure & records			
<b>Consumer Advisory 3 points</b>				
<b>23</b> <input checked="" type="radio"/> IN <input type="radio"/> OUT <input type="radio"/> N/A	Consumer advisory provided for raw or undercooked foods			
<b>Highly Susceptible Populations 5 points</b>				
<b>24</b> <input checked="" type="radio"/> IN <input type="radio"/> OUT <input type="radio"/> N/A	Proper foods used for susceptible populations			
<b>Chemical 5 points</b>				
<b>25</b> <input checked="" type="radio"/> IN <input type="radio"/> OUT <input type="radio"/> N/A <input type="radio"/> NO	Sanitizing solutions in excess of allowable limits			
<b>26</b> <input checked="" type="radio"/> IN <input type="radio"/> OUT	Toxic items properly identified, stored & used			
<b>Approved Procedures 3 points</b>				
<b>27</b> <input checked="" type="radio"/> IN <input type="radio"/> OUT <input checked="" type="radio"/> N/A	Compliance with variance, HACCP, policy			

Risk factors are improper practices or procedures identified as the most prevalent contributing factors of foodborne illness and injury. Public Health Interventions are control measures to prevent foodborne illness or injury. Greater weight is given to these violations.

### GOOD RETAIL PRACTICES/STANDARD OPERATING PROCEDURES

Good Retail Practices and Standard Operating Procedures are preventative measures to control the addition of pathogens, chemicals, and physical objects into food.

Mark "X" in box if numbered item IS NOT in compliance Mark "X" in appropriate box for C and/or R

C=corrected on-site during inspection R=repeat violation (2X demerits)

Pts	Description	C	R
<b>Safe Water &amp; Sewage Disposal</b>			
<b>28</b> 3	Water & ice from approved source		
<b>29</b> 3	Plumbing installed; backflow protection		
<b>30</b> 3	Sewage & wastewater disposal		
<b>Food Equipment</b>			
<b>31</b> 1	Facilities to maintain product temperature		
<b>32</b> 2	Approved thawing methods		
<b>33</b> 1	Thermometers/gauges provided, used & accurate		
<b>Food Identification</b>			
<b>34</b> 1	Food properly labeled; original container		
<b>Prevention from Contamination</b>			
<b>35</b> 3	Insects/rodents/animals present; unauthorized persons; openings		
<b>36</b> 2	Food protection during food preparation, storage & display		
<b>37</b> 2	Personal cleanliness (presentation)		
<b>38</b> 1	Wiping cloths: properly used & stored		
<b>39</b> 1	Fruits & vegetables properly washed before use		

  

Pts	Description	C	R
<b>Proper Use of Utensils</b>			
<b>40</b> 1	In-use utensils; properly stored		
<b>41</b> 1	Utensils, equipment & linens; properly stored, washed & handled		
<b>42</b> 1	Single-service articles: storage & dispensing		
<b>43</b> 2	Food (ice) contact surfaces: constructed, installed, maintained		
<b>44</b> 1	Non-food contact surfaces: constructed, installed, maintained		
<b>45</b> 1	Warewashing facilities: installed, maintained & used; test strips		
<b>46</b> 1	Non-food contact surfaces clean		
<b>Physical Facilities</b>			
<b>47</b> 3	Hot & cold water available, adequate pressure		
<b>48</b> 1	Physical facilities clean		
<b>49</b> 1	Cleaning equipment properly stored		
<b>50</b> 1	Toilet facilities constructed, supplied & cleaned, self-closing doors		
<b>51</b> 1	Refuse properly disposed; facilities maintained		
<b>52</b> 1	Physical facilities properly installed & maintained		
<b>53</b> 1	Adequate ventilation & lighting; designated areas used		

Received by (Signature) <i>[Signature]</i>	Received by (printed) _____	Title _____
Inspector (Signature) <i>[Signature]</i>	Follow-up required? <b>YES NO (circle one)</b>	Follow-up date: _____

