

Montgomery County Health Department

11191 Illinois Route 185
Hillsboro IL 62049

Division of Environmental Health
(217) 532-2001

Retail Food Sanitary Inspection Report

Establishment <i>Indian Grove Campground</i>	Permit# <i>24757</i>	Date <i>10/13/17</i>	Grade <i>A</i>	Score (100 - demerits) <i>98</i>
Address <i>15025 N. 4th Ave</i>	Establishment Code <i>01</i>	Risk <i>1</i>	Time in <i>3:00 pm</i>	
City <i>Coffeen IL</i>	State <i>IL</i>	Zip <i>62017</i>	Phone Number <i>(217) 534-3001</i>	Time out <i>4:00 pm</i>
Owner/Agent <i>Heather Hinchell</i>	Compliant with the Smoke-Free Illinois Act?			<input checked="" type="radio"/> YES <input type="radio"/> NO (circle one)

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

Compliance Status	Description	Points	C	R
Potentially Hazardous Food Time/Temperature 9 points				
<input checked="" type="radio"/> IN <input type="radio"/> OUT <input type="radio"/> N/A <input checked="" type="radio"/> NO	16 Proper cooking time & temperature			
<input checked="" type="radio"/> IN <input type="radio"/> OUT <input type="radio"/> N/A <input checked="" type="radio"/> NO	17 Proper reheating procedures for hot holding			
<input checked="" type="radio"/> IN <input type="radio"/> OUT <input type="radio"/> N/A <input checked="" type="radio"/> NO	18 Proper cooling time & temperature			
<input checked="" type="radio"/> IN <input type="radio"/> OUT <input type="radio"/> N/A <input type="radio"/> NO	19 Proper hot holding temperature			
<input checked="" type="radio"/> IN <input type="radio"/> OUT <input type="radio"/> N/A	20 Proper cold holding temperature			
<input checked="" type="radio"/> IN <input type="radio"/> OUT <input type="radio"/> N/A <input type="radio"/> NO	21 Proper date marking & disposition of PHF			
<input checked="" type="radio"/> IN <input type="radio"/> OUT <input type="radio"/> N/A <input type="radio"/> NO	22 Time as a public health control; approved procedure & records			
Consumer Advisory 3 points				
<input checked="" type="radio"/> IN <input type="radio"/> OUT <input type="radio"/> N/A	23 Consumer advisory provided for raw or undercooked foods			
Highly Susceptible Populations 5 points				
<input checked="" type="radio"/> IN <input type="radio"/> OUT <input type="radio"/> N/A	24 Proper foods used for susceptible populations			
Chemical 5 points				
<input checked="" type="radio"/> IN <input type="radio"/> OUT <input type="radio"/> N/A <input type="radio"/> NO	25 Sanitizing solutions in excess of allowable limits			
<input checked="" type="radio"/> IN <input type="radio"/> OUT	26 Toxic items properly identified, stored & used			
Approved Procedures 3 points				
<input checked="" type="radio"/> IN <input type="radio"/> OUT <input type="radio"/> N/A	27 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. C=corrected on-site during inspection R=repeat violation (2X demerits)

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

Pts	Description	C	R
Proper Use of Utensils			
40	1 In-use utensils; properly stored		
41	1 Utensils, equipment & linens; properly stored, washed & handled		
42	1 Single-service articles: storage & dispensing		
43	2 Food (ice) contact surfaces: constructed, installed, maintained		
44	1 Non-food contact surfaces: constructed, installed, maintained		
45	1 Warewashing facilities: installed, maintained & used; test strips		
46	1 Non-food contact surfaces clean		
Physical Facilities			
47	3 Hot & cold water available, adequate pressure		
48	1 Physical facilities clean		
49	1 Cleaning equipment properly stored		
50	1 Toilet facilities constructed, supplied & cleaned, self-closing doors		
51	1 Refuse properly disposed; facilities maintained		
52	1 Physical facilities properly installed & maintained		
53	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? YES <input checked="" type="radio"/> NO (circle one)	Follow-up date: _____

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Establishment <i>Indian Springs Campground</i>		Permit# <i>24757</i>	Date <i>10/13/17</i>		
TEMPERATURE OBSERVATIONS				SANITIZER OBSERVATIONS	
Item/Location	Temperature	Item/Location	Temperature	Sanitizer	Concentration/ Temperature
<i>Salad</i>	<i>39 °F</i>	<i>Baked Beans</i>	<i>144 °F</i>	<i>Not Setup</i>	ppm / °F
<i>Cheese</i>	<i>40 °F</i>	<i>Cole slaw</i>	<i>33 °F</i>		ppm / °F
<i>Hamburger</i>	<i>116.9 °F</i>	<i>Fish</i>	<i>35 °F</i>		ppm / °F
	°F	<i>shrimp</i>	<i>6 °F</i>		ppm / °F
	°F	<i>Cheese sticks</i>	<i>15 °F</i>		ppm / °F

MANAGER CERTIFICATION REQUIREMENT					
Manager Name	Illinois Certification Number	Expiration Date	Present During Inspection?		Original Copy Posted in Facility?
<i>Heather Horshell</i>	<i>01653946</i>	<i>10/20/19</i>	<input checked="" type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/> <input type="radio"/>
			<input type="radio"/>	<input type="radio"/>	<input type="radio"/> <input type="radio"/>
			<input type="radio"/>	<input type="radio"/>	<input type="radio"/> <input type="radio"/>
			<input type="radio"/>	<input type="radio"/>	<input type="radio"/> <input type="radio"/>
			<input type="radio"/>	<input type="radio"/>	<input type="radio"/> <input type="radio"/>
			<input type="radio"/>	<input type="radio"/>	<input type="radio"/> <input type="radio"/>

ITEM OBSERVATIONS AND CORRECTIVE ACTIONS		
Item #	Explanation of Violation and Recommendations for Correction	Correct By (NRI = Next Routine Inspection)

Received by (Signature) 	Inspector (Signature)
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Updated 3/2013