

Minnesota Department of Health Food, Pools and Lodging Services PO Box 64975 St. Paul, MN 55164-0975 651-201-4500

Type:

Full

Date: 11/02/22 Time: 10:30:07 Report: 1002221212 Food and Beverage Establishment Inspection Report

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Location:

Badger Independent School 676 Jody Randall, Fd. Ser. Dir. 110 Carpenter Avenue Badger, MN56714 Roseau County, 68

License Categories:

FAIF, FBLB, HOSP, FBSC, FBSS, FBC2

Expires on: 12/31/22

Establishment Info:

ID #: 0015711 Risk: Medium

Announced Inspection: No

Operator:

Ind. School District No. 676

Phone #: 2185283201

ID#: 17634

The violations listed in this report include any previously issued orders and deficiencies identified during this inspection. Compliance dates are shown for each item.

No NEW orders were issued during this inspection.

Surface and Equipment Sanitizers

Chlorine: = at Degrees Fahrenheit Location: PROVIDED - NOT SET

Violation Issued: No

Utensil Surface Temp: = at 160 Degrees Fahrenheit Location: THERMOLABEL - DISH MACHINE

Violation Issued: No

Food and Equipment Temperatures

Process/Item: Walk-In Freezer

Temperature: 0 Degrees Fahrenheit - Location: AMBIENT TEMP - WALK IN FREEZER

Violation Issued: No

Process/Item: Walk-In Cooler

Temperature: 38 Degrees Fahrenheit - Location: HAM - WALK IN COOLER

Violation Issued: No

Process/Item: Upright Cooler

Temperature: 39 Degrees Fahrenheit - Location: ITALIAN DRESSING - AURORA COOLER

Violation Issued: No

Process/Item: Milk Carton Server

Temperature: 41 Degrees Fahrenheit - Location: AMBIENT TEMP - MILK BUNKER

Violation Issued: No

Process/Item: Cooking

Temperature: 176 Degrees Fahrenheit - Location: CHICKEN - REHEATING IN OVEN

Violation Issued: No.

Type:

Date:

Time:

Full

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Food and Beverage Establishment **Inspection Report**

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Total Orders In This Report Priority 1 Priority 2 Priority 3 0 0

Note:

The walk in freezer at this establishment was observed to be incredibly full at time of inspection. It is MDH's opinion that this establishment would benefit greatly from additional freezer space.

NOTE: Plans and specifications must be submitted for review and approval prior to new construction, remodeling or alterations.

> I acknowledge receipt of the Minnesota Department of Health inspection report number 1002221212 of 11/02/22.

Certified Food Protection Manager Jody Randall

__ Expires: <u>06/25/23</u> Certification Number: FM15391

Inspection report reviewed with person in charge and emailed.

Mody Randall Kitchen Manager Signed:

Cassandra Hua

Public Health Sanitarian III

218-308-2142

Cassandra.Hua@state.mn.us

Report #: 10022212	12	Food Establis	hr	ne	nt in	spectio	n Repo	π				
Minnesota Department of Health					No. of RF/PHI Categories Out 0 Date 1						1/02/22	
Food, Pools and Lodging Services PO Box 64975 St. Paul, MN 55164-0975 Badger Independent School 676 License/Permit # 0015711 Food, Pools and Lodging Services PO Box 64975 St. Paul, MN 55164-0975 Address Jody Randall, Fd. Ser. Dir. Permit Holder Ind. School District No. 676						No. of Repeat RF/PHI Categories Out 0				Time In 10:30:07		
					Legal Authority MN Rules Chapter 4626					Time Out		
					City/			Zip Code	Telephone			
						Badger, MN		56714	2185283201			
					Purpose of Inspection Full			Est Type Risk Category M			ry 	
	FOODE	ORNE ILLNESS RISK FAC	TOF	RS /	AND PU	BLIC HEAL	TH INTERV	ENTIONS				
Circle desig	nated compliance stat	us (IN, OUT, N/O, N/A) for each numbered						"X" in appropriate bo				
IN= in compliance	OUT= not in com	bliance N/O= not observed	_	N/A=r	not applicab			site during inspectio	n 	R= repeat vi	cos F	
Compliance Status					Compliance Status							
1 (IN) OUT	Surpervision (IN)OUT PIC knowledgeable; duties & oversight				Time/Temperature Control for Safety 18 IN OUT N/A N/O Proper cooking time & temperature							
2 IN OUT N/A	Certified food protection manager, duties				19 (IN)OUT N/A N/O Proper cooking time a temperature							
2/(11/00)	Employee Health					/	_	ng time & tempera		9		
3 (IN) OUT	Mgmt/Staff;knowle	dge,responsibilities&reporting			21 IN	OUT N/A(N/	O Proper hot h	olding temperatur	es			
4 (IN) OUT	Proper use of repo	orting, restriction & exclusion			22 IN	OUT N/A	Proper cold I	holding temperatu	res			
5 (IN) OUT	Procedures for responding to vomiting & diarrheal				_	-		marking & dispos				
Good Hygenic Practices					24 11	OUT N/A N/	O Time as a pu	iblic health contro	l: proced	ures & records		
6 (IN) OUT N/O		ting, drinking, or tobacco use						sumer Advisory				
7 IN OUT N/O No discharge from eyes, nose, & mouth					25	OUT (N/A)	_	dvisory provided t		dercooked foo	d	
		ontamination by Hands			26(11	OUT N/A		usceptible Popul foods used; prohi		de not offered		
8 IN OUT N/O Hands clean & properly washed No bare hand contact with RTE foods or pre-approved					20(11	JOUT N/A		olor Additives a				
9 (IN) OUT N/A N/O		ure properly followed			27 IN	OUT(N/A)		es: approved & pr				
10 IN OUT		shing sinks supplied/accessible				I)OUT		nces properly ide				
		roved Source					Conformanc	e with Approved	Procedu	ıres		
1 IN OUT		m approved source			29 IN	OUT(N/A)	Compliance	with variance/spe	cialized p	rocess/HACCI	P	
12 IN OUT N/A N/O				-								
13 IN OUT		dition, safe, & unadulterated										
14 IN OUT (N/A) N/O	parasite destruction	available; shellstock tags, n			Rick f	actors (RF) are	improper practi	ces or proceedure	es identifi	ed as the most		
	Protection fr	om Contamination	-		preval	ent contributing	factors of foodb	orne iliness or in	ury. Publ	ic Health Inter	ventions	
15 IN OUT N/A N/O	Food separated a	nd protected			(PHI)	are control mea	sures to preven	t foodborne illnes	s or injury	/.		
16 IN OUT N/A	Food contact surfa	ices: cleaned & sanitized										
17 N OUT	Proper disposition reconditioned, & u	of returned, previously served, nsafe food										
						ACTICES						
		are preventative measures to control						al objects into foor corrected on-site de		ation D- rong	at violation	
Mark "X" in box if nu	impered item is no i	in compliance Mark X	_	PPIO	mate box	for COS and/or	K COS	=corrected on-site u	ring inspe	Chou Ka labe	COS R	
	Safe Food an	d Water	CO	K	1 22		Prop	er Use of Utensi	ls		000 1	
30 IN OUT NA	-	s used where required		Н	43	In-use ute	ensils: properly					
					44	Utensils, equipment & linens: properly stored, dried, &				& handled		
31 Water & ice obtained from an approved source					45					used		
32 IN OUTN/A Variance obtained for specialized processing methods					46							
Food Temperature Control						Utensil Equipment and Vending						
Proper cooling methods used; adequate equipment for temperature control					47	Food & non-food contact surfaces cleanable, properly designed, constructed, & used						
34 IN OUT N/A(N	NO Plant food pro	perly cooked for hot holding			48			stalled, maintaine	ed, & use	d; test strips		
35 (IN) OUT N/A N/O Approved thawing methods used					49	Non-food contact surfaces clean			•			
	ters provided & acc							ysical Facilities			-	
	Food Ident				50	Hot & col	d water available	e; adequate press	sure			
37 Food properly labled; original container					51	51 Plumbing installed; proper backflow devices		s				
		od Contamination			52	Sewage &	& waste water p	roperly disposed				
	Insects, rodents, & animals not present				53		Toilet facilities: properly constructed, supplied, & cleaned					
Contamination prevented during food prep, storage & display					54	Garbage & refuse properly disposed; facilities maintained				ained		
40 Personal cleanliness					55	Physical 1	facilities installe	d, maintained, & d	lean			
41 Wiping cloths: properly used & stored					56					ed		
42 Washing fr	uits & vegetables				57		ce with MCIAA					
Food Recalls:					58	Complian	ce with licensing	g & plan review				
Person in Charge (Sig	gnature)							Date: 11/02/22				
Inspector (Signature)		2			1							