

Food Establishment Inspection Report

Local Health Department Name and Address Cumberland County Health Department PO Box 130 200 S. Indiana St. Toledo, IL 62468		No. of Risk Factor/Intervention Violations	0	Date	8-30-23
Establishment <i>The Village Venue</i>		License/Permit #	117	Time In	3:00
Street Address <i>119 S Kentucky</i>		Permit Holder	<i>Megan & Barton Napier</i>		
City/State <i>Greenup, IL</i>		ZIP Code	62428	Time Out	3:20
		Purpose of Inspection	<i>Routine Inspection</i>		
		Risk Category	3		

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							
1	In			15	In		
Person in charge present, demonstrates knowledge, and performs duties				Food separated and protected			
2	N/A			16	In		
Certified Food Protection Manager (CFPM)				Food-contact surfaces; cleaned and sanitized			
Employee Health							
3	In			17	In		
Management, food employee and conditional employee; knowledge, responsibilities and reporting				Proper disposition of returned, previously served, reconditioned and unsafe food			
4	In			Time/Temperature Control for Safety			
Proper use of restriction and exclusion				18	N/A		
5	In			Proper cooking time and temperatures			
Procedures for responding to vomiting and diarrheal events				19	N/A		
Good Hygienic Practices							
6	In			Proper reheating procedures for hot holding			
Proper eating, tasting, drinking, or tobacco use				20	N/A		
7	In			Proper cooling time and temperature			
No discharge from eyes, nose, and mouth				21	N/A		
Preventing Contamination by Hands							
8	In			Proper hot holding temperatures			
Hands clean and properly washed				22	In		
9	In			Proper cold holding temperatures			
No bare hand contact with RTE food or a pre-approved alternative procedure properly allowed				23	N/A		
10	In			Proper date marking and disposition			
Adequate handwashing sinks properly supplied and accessible				24	N/A		
Approved Source							
Food obtained from approved source				Time as a Public Health Control; procedures & records			
11	In			Consumer Advisory			
Food received at proper temperature				25	N/A		
12	N/O			Consumer advisory provided for raw/undercooked food			
Food in good condition, safe, and unadulterated				Highly Susceptible Populations			
13	In			26	N/A		
Required records available: shellstock tags, parasite destruction				Pasteurized foods used; prohibited foods not offered			
14	N/A			Food/Color Additives and Toxic Substances			
				27	N/A		
				Food additives: approved and properly used			
GOOD RETAIL PRACTICES							
				28	In		
				Toxic substances properly identified, stored, and used			
Safe Food and Water							
				Conformance with Approved Procedures			
				29	N/A		
				Compliance with variance/specialized process/HACCP			

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							
30				Proper Use of Utensils			
Pasteurized eggs used where required				43			
31				In-use utensils: properly stored			
Water and ice from approved source				44			
32				Utensils, equipment & linens: properly stored, dried, & handled			
Variance obtained for specialized processing methods				45			
Food Temperature Control							
33				Single-use/single-service articles: properly stored and used			
Proper cooling methods used; adequate equipment for temperature control				46			
34				Gloves used properly			
Plant food properly cooked for hot holding				Utensils, Equipment and Vending			
35				47			
Approved thawing methods used				Food and non-food contact surfaces cleanable, properly designed, constructed, and used			
36				48			
Thermometers provided & accurate				Warewashing facilities: installed, maintained, & used; test strips			
Food Identification							
37				49			
Food properly labeled; original container				Non-food contact surfaces clean			
Prevention of Food Contamination							
				Physical Facilities			
38				50			
Insects, rodents, and animals not present				Hot and cold water available; adequate pressure			
39				51			
Contamination prevented during food preparation, storage and display				Plumbing installed; proper backflow devices			
40				52			
Personal cleanliness				Sewage and waste water properly disposed			
41				53			
Wiping cloths: properly used and stored				Toilet facilities: properly constructed, supplied, & cleaned			
42				54			
Washing fruits and vegetables				Garbage & refuse properly disposed; facilities maintained			
Employee Training							
57				55			
All food employees have food handler training				Physical facilities installed, maintained, and clean			
58				56			
Allergen training as required				Adequate ventilation and lighting; designated areas used			

Food Establishment Inspection Report

Establishment: The Village Venue Establishment #: 117

Water Supply: Public Private Waste Water System: Public Private

Sanitizer Type: ~~None made at time of inspection~~ 02 PPM: _____ Heat: _____

TEMPERATURE OBSERVATIONS							
Item/Location	Temp	Item/Location	Temp	Item/Location	Temp	Item/Location	Temp
<u>Freezer</u>	<u>40</u>						

OBSERVATIONS AND CORRECTIVE ACTIONS

Item Number	Violations cited in this report must be corrected within the time frames below.
	<p><i>No Violations during this inspection</i></p>
	<p><u>thevillagevenue@yahoo.com</u></p>

CFPM Verification (name, expiration date, ID#):
N/A

HACCP Topic: _____

Megan Napier 8/30/23
 Person in Charge (Signature) Date

Eric Huddleston Follow-up: Yes No (Check one)

Follow-up Date: _____

Cain Brauning-Scribe