

# FOOD ESTABLISHMENT INSPECTION REPORT

R-10

Strong Beginnings Early Learning  
Center Inc.  
388 E 6th St  
Neoga, IL 62447

|                          |             |                      |                        |                    |                  |
|--------------------------|-------------|----------------------|------------------------|--------------------|------------------|
| <u>Inspection Number</u> | <u>Date</u> | <u>Time In/Out</u>   | <u>Inspection Type</u> | <u>Client Type</u> | <u>Inspector</u> |
| DE9B8                    | 8/5/25      | 10:23 AM<br>10:37 AM | Routine                | Day care           | D.Clark          |
| <u>Permit Number</u>     | <u>Risk</u> | <u>Variance</u>      | <u>Estab.Type</u>      |                    |                  |
| 107                      | 1           |                      | Day care               |                    |                  |

## Foodborne Illness Risk Factors and Public Health Interventions

IN = in compliance OUT = out of compliance N/O = not observed N/A = not applicable COS = corrected on-site during inspection

Repeat Violations Highlighted in Yellow

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

Repeat Violations Highlighted in Yellow

## Good Retail Practices

| Safe Food and Water                                                | IN                       | OUT                      | NA                       | NO                       | COS                      | Proper Use of Utensils                                                     | IN                                  | OUT                      | NA                       | NO                       | COS                      |
|--------------------------------------------------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|----------------------------------------------------------------------------|-------------------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| 30. Pasteurized eggs used where required                           | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 43. In-use utensils: properly stored                                       | <input type="checkbox"/>            | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 31. Water & ice from approved source                               | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 44. Utensils, equip. & linens: properly stored, dried & handled            | <input type="checkbox"/>            | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 32. Variance obtained for specialized processing methods           | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 45. Single-use/single-service articles: properly stored & used             | <input type="checkbox"/>            | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| <u>Food Temperature Control</u>                                    | <u>IN</u>                | <u>OUT</u>               | <u>NA</u>                | <u>NO</u>                | <u>COS</u>               | 46. Gloves used properly                                                   | <input type="checkbox"/>            | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 33. Proper cooling methods used; adequate equip. for temp. control | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <u>Utensils, Equipment and Vending</u>                                     | <u>IN</u>                           | <u>OUT</u>               | <u>NA</u>                | <u>NO</u>                | <u>COS</u>               |
| 34. Plant food properly cooked for hot holding                     | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 47. All contact surfaces cleanable, properly designed, constructed, & used | <input type="checkbox"/>            | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 35. Approved thawing methods used                                  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 48. Warewashing facilities: installed, maintained & used; test strips      | <input type="checkbox"/>            | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 36. Thermometers provided & accurate                               | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 49. Non-food contact surfaces clean                                        | <input type="checkbox"/>            | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| <u>Food Identification</u>                                         | <u>IN</u>                | <u>OUT</u>               | <u>NA</u>                | <u>NO</u>                | <u>COS</u>               | <u>Physical Facilities</u>                                                 | <u>IN</u>                           | <u>OUT</u>               | <u>NA</u>                | <u>NO</u>                | <u>COS</u>               |
| 37. Food properly labeled; original container                      | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 50. Hot & cold water available; adequate pressure                          | <input type="checkbox"/>            | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| <u>Prevention of Food Contamination</u>                            | <u>IN</u>                | <u>OUT</u>               | <u>NA</u>                | <u>NO</u>                | <u>COS</u>               | 51. Plumbing installed; proper backflow devices                            | <input type="checkbox"/>            | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 38. Insects, rodents & animals not present                         | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 52. Sewage & waste water properly disposed                                 | <input type="checkbox"/>            | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 39. Contamination prevented in prep, storage & display             | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 53. Toilet facilities: properly constructed, supplied, & cleaned           | <input type="checkbox"/>            | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 40. Personal cleanliness                                           | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 54. Garbage & refuse properly disposed; facilities maintained              | <input type="checkbox"/>            | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 41. Wiping cloths; properly used & stored                          | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 55. Physical facilities installed, maintained & clean                      | <input type="checkbox"/>            | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 42. Washing fruits & vegetables                                    | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 56. Adequate ventilation & lighting; designated areas use                  | <input type="checkbox"/>            | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|                                                                    |                          |                          |                          |                          |                          | 60. 105 CMR 590 violations / local regulations                             | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

Official Order for Correction: Based on an inspection today, the items marked "OUT" indicated violations of 105 CMR 590.000 and applicable sections of the FDA Food Code. This report, when signed below by a Board of Health member or its agent constitutes an order of the Board of Health. Failure to correct violations cited in this report may result in suspension or revocation of the food establishment permit and cessation of food establishment operations. If you are subject to a notice of suspension, revocation, or nonrenewal pursuant to 105 CMR 590.000 you may request a hearing before the board of health in accordance with 105 CMR 590.015(B).



D. Clark



Amanda Gavis - Expires 9/20/2026  
Certificate #: 21036402

|                 |           |             |                    |                           |
|-----------------|-----------|-------------|--------------------|---------------------------|
| <u>Priority</u> | <u>Pf</u> | <u>Core</u> | <u>Risk Factor</u> | <u>Repeat Risk Factor</u> |
| 0               | 0         | 0           | 0                  | 0                         |

Follow Up Required: ☐ Y Follow Up Date:

# FOOD SAFETY INSPECTION REPORT

Page Number

2

Strong Beginnings Early Learning  
Center Inc.  
388 E 6th St  
Napa, IL 62447

Inspection Number  
DE9B8

Date  
8/5/25

Time In/Out  
10:23 AM  
10:37 AM

Inspector  
D. Clark

## Inspection Report (Continued)

Repeat Violations Highlighted in Yellow

### Notes

#### Notes

- 88 Notes - Kitchen -  
N Certificate - General Notes



### Positive Notes

#### Proper Food Safety Practices

- 98 98 Proper Food Safety Practices - Kitchen -  
N - Excellent



# FOOD SAFETY INSPECTION REPORT

Page Number

3

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DE9B8

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Time In/Out  
10:23 AM  
10:37 AM

Inspector  
D. Clark

## Inspection Report (Continued)

Repeat Violations Highlighted in Yellow

## Temperatures

| Area    | Equipment        | Product     | Notes | Temps |
|---------|------------------|-------------|-------|-------|
| Kitchen | Reach-In Cooler  | Orange      |       | 35 °F |
| Kitchen | Reach-In Cooler  | Milk        |       | 34 °F |
| Kitchen | Reach-in Freezer | Hash browns |       | 7 °F  |
| Kitchen | Reach-in Freezer | Sausage     |       | 8 °F  |

Temperatures in **RED** identify items in the temperature danger zone. See the report notes for specific details.

## Notes

No violations at time of inspection. Proper safety practices observed. Good clean operation.