



Foodservice Establishment Inspection Report

Establishment Information	
Facility Name LINCOLN MIDDLE SCHOOL	Facility Type DPI School
Facility ID # HSAT-7QX92N	Facility Telephone # 608 789-7785
Facility Address 510 9TH STREET S LA CROSSE, WI 54601	
Licensee Name SCHOOL DISTRICT OF LA CROSSE	Licensee Address 807 EAST AVENUE SOUTH LA CROSSE, WI 54601

Inspection Information		
Inspection Type Routine	Inspection Date November 18, 2015	Total Time Spent

Equipment Temperatures	
Description	Temperature (Fahrenheit)
Refrigeration	38.5, 40
Freezer	-6, 6.5
Milk coolers	34, 43, 37, 37

Food Temperatures	
Description	Temperature (Fahrenheit)
Reheat - taco meat	166

Warewashing Info					
Machine Name	Sanitization Method	Thermo Label	PPM	Sanitizer Name	Sanitizer Type
High temp	Heat	Passed 2x			
Sanitizer bucket	Chemical		50	CHlorine	
Sanitizer bucket2	Chemical		100	Chlorine	

OPERATOR - The violations in operating procedure or physical arrangement indicated below must be corrected by the next routine inspection or by a date specified in this report.

Observed Violations
Total # 1
Good Retail Practices - 53 - Physical facilities installed, maintained and clean This is a core item REPEAT OBSERVATION: Walls above cooking area are chipping and food is subject to contamination

from paint chips.

CORRECTIVE ACTION(S): Repair area or replace with approved materials. Walls, floors and ceilings shall be smooth, durable and easily cleanable. If located in areas subject to moisture they shall also be non-absorbent. Correct By: 18-Jan-2016

CODE CITATION: 6-101.11 (A) Except as specified in ¶ (B) of this section, materials for indoor floor, wall, and ceiling surfaces under conditions of normal use shall be:

(1) SMOOTH, durable, and EASILY CLEANABLE for areas where FOOD ESTABLISHMENT operations are conducted;

(2) Closely woven and EASILY CLEANABLE carpet for carpeted areas; and

(3) Nonabsorbent for areas subject to moisture such as FOOD preparation areas, walk-in refrigerators, WAREWASHING areas, toilet rooms, MOBILE FOOD ESTABLISHMENT SERVICE BASE, and areas subject to flushing or spray cleaning methods.

(B) In a TEMPORARY FOOD ESTABLISHMENT:

(1) If graded to drain, a floor may be concrete, machine-laid asphalt, or dirt or gravel if it is covered with mats, removable platforms, duckboards, or other APPROVED materials that are effectively treated to control dust and mud; and

(2) Walls and ceilings may be constructed of a material that protects the interior from the weather and windblown dust and debris.

Comments

1. [Menu review and risk assessment conducted.](#)

Any operator aggrieved by an order of this department under this chapter may request a hearing as provided in ch.227 statute, if state licensed, or a local ordinance if licensed by an agent health department.

Person in Charge



Sanitarian



Nicole Frankfourth
(608) 785-9731



DPI School Inspection Report

Inspection Information			
School Name LINCOLN MIDDLE SCHOOL	510 9TH STREET S LA CROSSE, WI 54601	HSAT-7QX92N	Sanitarian Nicole Frankfourth
Person In Charge Jerrilyn Donley	Contact Person	Telephone # (-)	Inspection Date (Current Date) 16-Mar-2016
School District	Operator Certified <input checked="" type="radio"/> No <input type="radio"/> Yes	Name Of Operator	Inspection Type Second Inspection
Food Safety Plan Onsite <input type="radio"/> No <input checked="" type="radio"/> Yes	Plan Last Reviewed By Food Service Authority		

Smoking

Food Safety Program	Employee Information	Types Of Equipment
Food Service Authority Description Facility Type <input type="radio"/> No <input checked="" type="radio"/> Yes	<input type="radio"/> No <input checked="" type="radio"/> Yes	<input type="radio"/> No <input checked="" type="radio"/> Yes

Written Standard Operating Procedure (SOP) - (Review Three)	SOP Name	SOP Name	SOP Name
SOP Components			
(Policy and Procedure May Include Critical Limits)	<input type="radio"/> No <input checked="" type="radio"/> Yes	<input type="radio"/> No <input checked="" type="radio"/> Yes	<input type="radio"/> No <input checked="" type="radio"/> Yes
Monitoring Instructions	<input type="radio"/> No <input checked="" type="radio"/> Yes	<input type="radio"/> No <input checked="" type="radio"/> Yes	<input type="radio"/> No <input checked="" type="radio"/> Yes
Recording Instructions	<input type="radio"/> No <input checked="" type="radio"/> Yes	<input type="radio"/> No <input checked="" type="radio"/> Yes	<input type="radio"/> No <input checked="" type="radio"/> Yes
Corrective Action Procedures	<input type="radio"/> No <input checked="" type="radio"/> Yes	<input type="radio"/> No <input checked="" type="radio"/> Yes	<input type="radio"/> No <input checked="" type="radio"/> Yes

Written Plan Using HACCP Principles <input checked="" type="radio"/> Yes <input type="radio"/> No	Process	Comments
Menu Items Categorized by Process	Process 1 - No Cook <input type="radio"/> No <input checked="" type="radio"/> Yes	
	Process 2 - Same Day Service <input type="radio"/> No <input checked="" type="radio"/> Yes	
	Process 3- Complex Food Preparation <input type="radio"/> No <input checked="" type="radio"/> Yes	
Each Process Identifies	Critical Control Points (CCP's) <input type="radio"/> No <input checked="" type="radio"/> Yes	
	Critical Limits Established <input type="radio"/> No <input checked="" type="radio"/> Yes	

Record three random dates within the last inspection period, give an over all review for each of the categories. "Yes" if in compliance, "No" if not in compliance, note in comments.

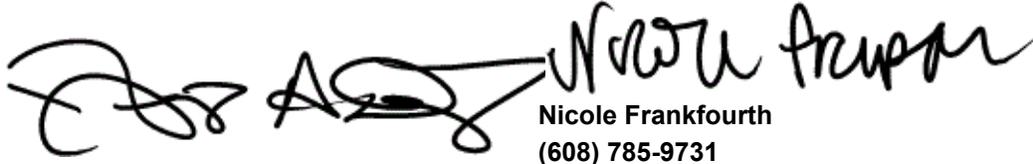
Records Review	Date	Date	Date
	07-Jan-2016	11-Jan-2016	21-Jan-2016
Temperatures monitored and recorded.	<input type="radio"/> No <input checked="" type="radio"/> Yes	<input type="radio"/> No <input checked="" type="radio"/> Yes	<input type="radio"/> No <input checked="" type="radio"/> Yes
Temperature record accurate and consistent.	<input type="radio"/> No <input checked="" type="radio"/> Yes	<input type="radio"/> No <input checked="" type="radio"/> Yes	<input type="radio"/> No <input checked="" type="radio"/> Yes
Corrective actions documented.	<input type="radio"/> No <input checked="" type="radio"/> Yes	<input type="radio"/> No <input checked="" type="radio"/> Yes	<input type="radio"/> No <input checked="" type="radio"/> Yes
Employee food safety training program in place.	<input type="radio"/> No <input checked="" type="radio"/> Yes	<input type="radio"/> No <input checked="" type="radio"/> Yes	<input type="radio"/> No <input checked="" type="radio"/> Yes

Comments

1. Add new serving coolers to equipment list.

Person in Charge

Sanitarian



Nicole Frankfourth
(608) 785-9731