



Foodservice Establishment Inspection Report

Establishment Information	
Facility Name ONALASKA MIDDLE SCHOOL	Facility Type DPI School
Facility ID # HSAT-7QX8Y2	Facility Telephone # 608 783-6251
Facility Address 711 QUNICY ST ONALASKA , WI 54650	
Licensee Name SCHOOL DISTRICT OF ONALASKA	Licensee Address 1821 MAIN STREET E ONALASKA , WI 54650

Inspection Information		
Inspection Type Routine	Inspection Date 11/11/2015	Total Time Spent

Equipment Temperatures	
Description	Temperature (Fahrenheit)
milk walk in cooler	32
serving line reach in cooler	41
ala cart reach ni coolers (2)	30, 34.5
walk in coolers (2)	32.5, 34
milk bunker	33
walk in freezers (2)	12, 16

Food Temperatures	
Description	Temperature (Fahrenheit)
French toast (hot hold, re-heat)	149, 176
Sausage links (hot hold)	142
Tri tator (hot hold)	144
Pizza (hot hold, re-heat)	145, 182
Cucumbers (cold hold)	43
Kiwi	41

Warewashing Info					
Machine Name	Sanitization Method	Thermo Label	PPM	Sanitizer Name	Sanitizer Type
dish machine	high temperature	Passed			

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

Risk/Intervention - 22 - Time as a public health control: procedures and record

This is a priority foundation item

OBSERVATION: No time as a public health control plan is available for review or processes were observed that indicates a food was not properly prepared before using time as a public health control.

CORRECTIVE ACTION(S): Food items out of temperature control shall be discarded and any food improperly prepared that is considered unsafe shall be discarded. Time as a public health control shall not be used until a plan is provided and readily available for review by the regulatory authority. Correct By: 19-Nov-2015

CODE CITATION: 3-501.19 (A) Except as specified under ¶ (E) of this section, if time without temperature control is used as the public health control for a working supply of POTENTIALLY HAZARDOUS FOOD (TIME/TEMPERATURE CONTROL FOR SAFETY FOOD) before cooking, or for READY-TO-EAT POTENTIALLY HAZARDOUS FOOD (TIME/TEMPERATURE CONTROL FOR SAFETY FOOD) that is displayed or held for sale or service:

(1) Written procedures shall be prepared in advance, maintained in the FOOD ESTABLISHMENT and made available to the REGULATORY AUTHORITY upon request that specify: [Pf]

(a) Methods of compliance with Subparagraphs (B) (1) to (4), (C) (1) to (5), or (D)(1) to (5) of this section; [Pf] and

(b) Methods of compliance with § 3-501.14 for FOOD that is prepared, cooked, and refrigerated before time is used as a public health control. [Pf]

Comments

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

[Had dish machine serviced to use chlorine as a backup sanitizing method.](#)

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



kerry johnson

Sanitarian

Aron Newberry
(608) 785-9730



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Inspection Information		
Inspection Type Follow Up	Inspection Date 11/19/2015	Total Time Spent

Equipment Temperatures	
Description	Temperature (Fahrenheit)
milk walk in cooler	
-serving line reach in cooler	
ala cart reach ni coolers (2)	
walk in coolers (2)	
milk bunker	
walk in freezers (2)	

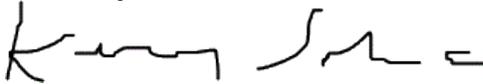
Warewashing Info					
Machine Name	Sanitization Method	Thermo Label	PPM	Sanitizer Name	Sanitizer Type
dish machine	high temperature	Passed			

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 # 0

Comments
Menu review and risk assessment conducted. Changed operating, and monitoring procedures to ensure that all salad bar item are maintained at or below 41F.

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

Kerry Johnson

Sanitarian

Aron Newberry
(608) 785-9730



DPI School Inspection Report

Inspection Information			
School Name ONALASKA MIDDLE SCHOOL	711 QUNICY ST ONALASKA , WI 54650	HSAT-7QX8Y2	Sanitarian Doug Schaefer
Person In Charge June Lanzel	Contact Person	Telephone # (608)-783-6251	Inspection Date (Current Date) 04/13/2016
School District	Operator Certified <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	Name Of Operator	Inspection Type Second Inspection
Food Safety Plan Onsite <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	Plan Last Reviewed By Food Service Authority 04/01/2015		

Smoking

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

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

Written Plan Using HACCP Principles	Process	Comments
<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
Menu Items Categorized by Process	Process 1 - No Cook <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
	Process 2 - Same Day Service <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
	Process 3- Complex Food Preparation <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
Each Process Identifies	Critical Control Points (CCP's) <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
	Critical Limits Established <input checked="" type="checkbox"/> No <input type="checkbox"/> 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
	02/18/2016	02/15/2016	02/10/2016
Temperatures monitored and recorded.	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
Temperature record accurate and consistent.	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
Corrective actions documented.	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
Employee food safety training program in place.	<input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No <input checked="" type="checkbox"/> Yes

Comments

Cooling temperatures are taken at approximately 2 hours on foods that will be frozen.
 No cooling temperatures taken on foods cooling that will not be frozen.
 No initial temperature records recorded or CA recorded.
 No temperature recorded for second cooks.

Person in Charge



Sanitarian



Doug Schaefer
(608) 785-9679



Retail Food Establishment Inspection Report

Establishment Information	
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Licensee Name SCHOOL DISTRICT OF ONALASKA	Licensee Address 1821 MAIN STREET E ONALASKA , WI 54650

Inspection Information		
Inspection Type Routine	Inspection Date 09/28/2016	Total Time Spent

Equipment Temperatures	
Description	Temperature (Fahrenheit)
Refrigeration	40, 41, 36, 42, 40, 37, 38

Warewashing Info						
Machine Name	Sanitization Method	Thermo Label	PPM	Sanitizer Name	Sanitizer Type	Temperature
dish machine	high	pass 160	350		QA	
Wioing cloth	temperature	degree				
spray bottle	chemical					

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
<p>Total # 2</p> <p>Good Retail Practices - 37 - Contamination prevented during food preparation, storage and display This is a core item OBSERVATION: Food is subject to potential contamination by excess condensate in the walk in freezer.. CORRECTIVE ACTION(S): Change methods or procedures to protect foods from contamination. Correct By: 28-Sep-2016 CODE CITATION: 3-307.11 FOOD shall be protected from contamination that may result from a factor or source not specified under Subparts 3-301 to 3-306.</p> <p>Good Retail Practices - 42 - Utensils, equipment and linens: properly stored, dried and handled This is a core item OBSERVATION: Clean utensils are being stored or stacked without being air-dried. (Trays) CORRECTIVE ACTION(S): Air dry all clean utensils before storage and before contact with food. Correct By: 28-Sep-2016 CODE CITATION: 4-901.11 After cleaning and SANITIZING, EQUIPMENT and UTENSILS: (A) Shall be air-dried or used after adequate draining as specified in the first paragraph of 40 CFR 180.940 — Tolerance exemptions for active and inert ingredients for use in antimicrobial formulations (food-contact surface sanitizing solutions), before contact with FOOD; and (B) May not be cloth dried except that UTENSILS that have been air-dried may be polished with cloths that are maintained clean and dry.</p>

Comments

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



Jackie Henke

Sanitarian



Doug Schaefer
(608) 785-9679