



Foodservice Establishment Inspection Report

Establishment Information	
Facility Name SAND LAKE ELEMENTARY	Facility Type Restaurant
Facility ID # ASTS-9WVQJY	Facility Telephone # 608
Facility Address 3600 SAND LAKE ONALASKA , WI 54650	
Licensee Name SCHOOL DISTRICT OF HOLMEN	Licensee Address P O 580 HOLMEN , WI 54636

Inspection Information		
Inspection Type Routine	Inspection Date 10/09/2015	Total Time Spent

Equipment Temperatures	
Description	Temperature (Fahrenheit)
Refrigeration	39
freezer	5

Food Temperatures	
Description	Temperature (Fahrenheit)
Chicken CT	170

Warewashing Info					
Machine Name	Sanitization Method	Thermo Label	PPM	Sanitizer Name	Sanitizer Type
Dish machine	high Temp	pass 160	300		QA
Wiping clothes	chemical	degree			

Certified Manager		
Name TINA M ANDERSON	Certificate # BHEP-8C7QSL	Certificate Expiration 10/28/2015

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.

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

Tina Andersen

Sanitarian


Doug Schaefer
(608) 785-9679



DPI School Inspection Report

Inspection Information			
School Name SAND LAKE ELEMENTARY	3600 SAND LAKE ONALASKA , WI 54650	ASTS-9WVQJY	Sanitarian Doug Schaefer
Person In Charge Tina Anderson	Contact Person	Telephone # (608)-781-0974	Inspection Date (Current Date) 03/31/2016
School District Holmen	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 03/06/2015		

Smoking

Food Safety Program	Employee Information	Types Of Equipment
Food Service Authority Description Facility Type <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

Written Standard Operating Procedure (SOP) - (Review Three)	SOP Name	SOP Name	SOP Name
SOP Components	Heating PHF	Reheating Commercially Processed rte PHF	Cooling PHF
(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 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
Recording Instructions	<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
Corrective Action Procedures	<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

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 type="checkbox"/> No <input checked="" type="checkbox"/> Yes	
	Process 2 - Same Day Service <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	
	Process 3- Complex Food Preparation <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	
Each Process Identifies	Critical Control Points (CCP's) <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	
	Critical Limits Established <input type="checkbox"/> No <input checked="" 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
	10/20/2015	10/28/2015	01/28/2016
Temperatures monitored and recorded.	<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
Temperature record accurate and consistent.	<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
Corrective actions documented.	<input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No <input checked="" 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

1/29 No corrective action for reheating corn on the cob - 147 degrees. Process type missing for corn and potatoes
10/20 cooled sausages identified as a reheat 10/21. not listed on the record by process type.
Excellent cooling record.
Process 3 items have been added to the menu as they are identified.
Discussed capturing corrective action on production records.

Person in Charge



Sanitarian



Doug Schaefer
(608) 785-9679



Retail Food Establishment Inspection Report

Establishment Information	
Facility Name SAND LAKE ELEMENTARY	Facility Type Restaurant
Facility ID # ASTS-9WVQJY	Facility Telephone # 608
Facility Address 3600 SAND LAKE ONALASKA , WI 54650	
Licensee Name SCHOOL DISTRICT OF HOLMEN	Licensee Address PO BOX 580 HOLMEN , WI 54636

Inspection Information		
Inspection Type Routine	Inspection Date 09/20/2016	Total Time Spent

Equipment Temperatures	
Description	Temperature (Fahrenheit)
Refrigeration	39, 41

Food Temperatures	
Description	Temperature (Fahrenheit)
Eggs @ 1:40 into cooling	73
Chicken @ 0:45 into cooling	103
Hot holding	150, 153

Warewashing Info						
Machine Name	Sanitization Method	Thermo Label	PPM	Sanitizer Name	Sanitizer Type	Temperature
Dish machine Wiping clothes	high Temp chemical	pass 160 degree	300		QA	

Certified Manager		
Name TINA M ANDERSON	Certificate # BHEP-8C7QSL	Certificate Expiration 10/28/2015

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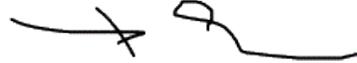
Observed Violations
Total # 0

Comments
<p>Discussed meals on wheels extra portions and containers and hot packing (vacuum created). Discussed meat slicer. Discussed floor cleaning under equipment and worn pipe insulation. Tina's CFM expires in 2020.</p>

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Person in Charge


Tina Anderson

Sanitarian

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