

MN Department of Health Food Pools & Lodging Services P.O. Box 64975 St. Paul, MN 55164-0975 651/201-4500

Full Type: Date: 09/12/23 Time: 11:50:00 Report: 6504231309

## **Food and Beverage Establishment Inspection Report**

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St. Dominic School 216 Spring Street North Northfield, MN55057 Rice County, 66

**License Categories:** 

FAIF, FBLB, HOSP, FBSC, FBC2

Expires on: 12/31/23

Establishment Info:

ID #: 0014028 Risk: High

Announced Inspection: No

Operator:

St. Dominic School

Phone #: 5076458136

ID#: 31528

The violations listed in this report include any previously issued orders and deficiencies identified during this inspection. Compliance dates are shown for each item.

No NEW orders were issued during this inspection.

Total Orders In This Report Priority 1 Priority 3 Priority 2 0 0

WALK-IN FREEZER: FOODS FIRM; TRUE REFRIGERATOR: MILK, 34F; MILK COOLER: 39F; HOT

HOLD: NOODLE SAUCE, 167F: BROCCOLI,139F: DISH WASHER UTENSIL SURFACE

TEMPERATURE: 167F WITH DISK.

ADDITIONAL CFPM: Karen A. Grieger #107222 exp: 7-20-2024

REPORT E-MAILED TO: kitchen@schoolofstdominic.org

NOTE: Plans and specifications must be submitted for review and approval prior to new construction, remodeling or alterations.

> I acknowledge receipt of the MN Department of Health inspection report number 6504231309 of 09/12/23.

Certified Food Protection Manager Marie C. Lazaro-Hefer

\_ Expires: <u>08/</u>02/26 Certification Number: 90175

Inspection report reviewed with person in charge and emailed.

Marie Lazaro-Hefer

**FSD** 

Signed:

David W. Reimann R.S. Environmental Health Spec III Mankato District Office 507-344-2727

david.reimann@state.mn.us

MAN .	MN Department of Hea	Food Establis				•	II Categories C		0	Date 09	9/12/2
	Food Pools & Lodging					No. of Repea	at RF/PHI Cate	gories Out	0	Time In 1	1:50:0
DEPARTMENT OF HEALTH	P.O. Box 64975 St. Paul, MN 55164-097	75					rity MN Rules (			Time Out	
St. Dominic School		dress		U	City/St			Zip Code 55057		phone 6458136	
License/Permit #		Spring Street North				eld, MN se of Inspecti	ion	Est Type	507	Risk Catego	rv
0014028		Dominic School			Full	or mopout		Lot Typo		H	.,
	FOODBORI	NE ILLNESS RISK FAC	TOR	RS A	ND PUE	BLIC HEAL	TH INTERV	ENTIONS			
		, OUT, N/O, N/A) for each numbered			-4 8			"X" in appropriate bo			-1-4:
IN= in compliance	OUT= not in compliance	e N/O= not observed			ot applicable			site during inspection	1	R= repeat vi	-
Compliance S		vrvicion	COS	R	Co	mpliance S		nperature Contro	d for Cr	of a true	C
1 (IN) OUT	PIC knowledgeable; dut	ervision ties & oversight			18 IN	OUT N/A N/		ing time & temper		ilety	_
2 (IN)OUT N/A	Certified food protection			$\dashv$		OUT N/A( N/	~	ating procedures f		olding	+
	· · · · · · · · · · · · · · · · · · ·	ee Health						ng time & tempera		oluli 19	
3 (IN) OUT	Mgmt/Staff;knowledge,r	esponsibilities&reporting						olding temperatur			$\top$
4 (IN) OUT	Proper use of reporting,	restriction & exclusion			- X	OUT N/A		holding temperatu			
5 (IN) OUT	Procedures for respondi events	ing to vomiting & diarrheal			23( IN)	OUT N/A N/	O Proper date	marking & disposi	tion		
		nic Practices			24 IN	OUT(N/A) N/	O Time as a pu	ublic health contro	l: proce	dures & records	
6 (IN) OUT N/C	Proper eating, tasting, o							nsumer Advisory			
7 (IN) OUT N/C	No discharge from eyes	, nose, & mouth			25 IN	OUT(N/A)		dvisory provided f		indercooked foo	d
		mination by Hands	,		0-1 "	OLIT ALIC	, , ,	usceptible Popul			
8 IN OUT (N/O	7			_	26 IN	OUT(N/A)		foods used; prohil			
9 (IN) OUT N/A N/O	No bare hand contact was alternate procedure pr	vith RTE foods or pre-approved roperly followed			27 IN	OUT(N/A)	_	es: approved & pr			
10 IN ) OUT		sinks supplied/accessible				OUT		inces properly ide			+
	Approved	I Source						e with Approved			
1 (IN) OUT	Food obtained from app	proved source			29 IN	OUT(N/A)	Compliance	with variance/spe	cialized	process/HACCI	
12 IN OUT N/A(N/C	Food received at proper	r temperature					-				
			-								
13( IN) OUT	Food in good condition,	safe, & unadulterated									
	Required records availa	<u> </u>									
	Required records availa parasite destruction	ble; shellstock tags,			Risk fac	ctors(RF) are	improper practi	ces or proceedure	es identi	fied as the most	
14 IN OUT N/A N/C	Required records availa parasite destruction  Protection from C	ble; shellstock tags,			prevaler	nt contributing	factors of foodb	ces or proceedure porne illness or inj t foodborne illness	ury. <b>Pu</b> k	lic Health Inter	vent
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