



Type: Full
Date: 11/09/22
Time: 11:21:34
Report: 1036221094

Food and Beverage Establishment Inspection Report

Location:

Hastings Senior High
Brittney Hirschauer, Fd. Ser.
200 General Sieben Drive
Hastings, MN55033
Dakota County, 19

Establishment Info:

ID #: 0015003
Risk: Medium
Announced Inspection: No

License Categories:

FAIF, FBLB, HOSP, FBSC, FBC2

Expires on: 12/31/22

Operator:

Ind. School District No. 200

Phone #: 6514807126
ID #: 16838

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

The following orders were issued during this inspection.

4-200 Equipment Design and Construction

4-202.16

MN Rule 4626.0540 Provide non-food contact surfaces that are free of unnecessary ledges, projections and crevices and are designed and constructed to allow easy cleaning.

THERE ARE A FEW CHIPPED/DAMAGED CERAMIC TILES ALONG THE CORNER EDGES OF THE SERVING STATIONS OF THE PIZZA AND GRILL LINES. REPAIR/REPLACE AND MAINTAIN.

Comply By: 04/10/23

6-100 Physical Facility Construction Materials

6-101.11A1

MN Rule 4626.1325A1 Provide smooth, durable, and easily cleanable floor, wall and ceiling surfaces.

THERE WERE A FEW MISSING CEILING TILES IN THE ALA CARTE AND AND GRAB & GO AREA. REPLACE AND MAINTAIN.

Comply By: 01/10/23

6-200 Physical Facility Design and Construction

6-202.11A

MN Rule 4626.1375A Provide effective shielding, coated or shatter-resistant light bulbs for all light fixtures where there is exposed food, clean equipment, utensils and linens, or unwrapped single-service or single-use articles.

OBSERVED EXPOSED LIGHT BULBS IN WALK IN COOLER #1. COVER EXPOSED BULBS WITH PROPER SHIELD.

Comply By: 02/10/23

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6-500 Physical Facility Maintenance/Operation and Pest Control

6-501.14A

MN Rule 4626.1530A Maintain clean all intake and exhaust air ducts and change filters so they are not a source of contamination.

THERE IS SOME DUST/DEBRIS BUILD UP ON THE VENT FILTERS ABOVE THE OVENS/GRILL IN MAIN KITCHEN AREA. CLEAN AND MAINTAIN AT A GREATER FREQUENCY TO PREVENT SUCH ACCUMULATION.

Comply By: 01/10/23

Surface and Equipment Sanitizers

HOT WATER: = at 168.8 Degrees Fahrenheit
Location: Dish Machine
Violation Issued: No

QUATERNARY AMMONIA: = 300PPM at Degrees Fahrenheit
Location: SANI BUCKET KITCHEN
Violation Issued: No

QUATERNARY AMMONIA: = 300PPM at Degrees Fahrenheit
Location: SANI BUCKET CAFETERIA
Violation Issued: No

QUATERNARY AMMONIA: = 300PPM at Degrees Fahrenheit
Location: 3 COMP SINK
Violation Issued: No

Food and Equipment Temperatures

Process/Item: Cold Hold/SHRED CHZ
Temperature: 39 Degrees Fahrenheit - Location: WALK IN COOLER 1
Violation Issued: No

Process/Item: Cold Hold/YOGURT
Temperature: 39 Degrees Fahrenheit - Location: WALK IN COOLER 1
Violation Issued: No

Process/Item: Cold Hold/COTTAGE CHZ
Temperature: 39 Degrees Fahrenheit - Location: WALK IN COOLER 1
Violation Issued: No

Process/Item: Cold Hold/MILK
Temperature: 40 Degrees Fahrenheit - Location: WALK IN COOLER 2
Violation Issued: No

Process/Item: Cold Hold/SHRED CHZ
Temperature: 38 Degrees Fahrenheit - Location: COOLER 3
Violation Issued: No

Process/Item: Cold Hold/SALAD
Temperature: 40 Degrees Fahrenheit - Location: COOLER 5
Violation Issued: No

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Process/Item: Cold Hold/COLESLAW
Temperature: 41 Degrees Fahrenheit - Location: SALAD BAR
Violation Issued: No

Process/Item: Cold Hold/COTTAGE CHZ
Temperature: 41 Degrees Fahrenheit - Location: SALAD BAR
Violation Issued: No

Process/Item: Cold Hold/LETTUCE
Temperature: 41 Degrees Fahrenheit - Location: SALAD BAR
Violation Issued: No

Process/Item: Hot Hold/CHX DUMPLING SOUP
Temperature: 166 Degrees Fahrenheit - Location: SALAD BAR
Violation Issued: No

Process/Item: Hot Hold/PARM CHZ ZUC
Temperature: 148 Degrees Fahrenheit - Location: WARMING STATION
Violation Issued: No

Process/Item: Hot Hold/BURGER
Temperature: 162 Degrees Fahrenheit - Location: GRILL WARMER
Violation Issued: No

Process/Item: Hot Hold/NOODLES
Temperature: 149 Degrees Fahrenheit - Location: MAIN LINE 1 SERVE STATION
Violation Issued: No

Process/Item: Hot Hold/NOODLES
Temperature: 151 Degrees Fahrenheit - Location: MAIN LINE 2 SERVE STATION
Violation Issued: No

Process/Item: Ambient Temp
Temperature: 41 Degrees Fahrenheit - Location: COOLER 8
Violation Issued: No

Process/Item: Ambient Temp
Temperature: 40 Degrees Fahrenheit - Location: COOLER 12
Violation Issued: No

Process/Item: Cold Hold/MILK CARTON
Temperature: 41 Degrees Fahrenheit - Location: MILK COOLER
Violation Issued: No

Process/Item: Cold Hold/MILK
Temperature: 39 Degrees Fahrenheit - Location: BULK MILK DISPENSER 1
Violation Issued: No

Process/Item: Cold Hold/MILK
Temperature: 39 Degrees Fahrenheit - Location: BULK MILK DISPENSER 2
Violation Issued: No

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Process/Item: Cook Temp/PIZZA
Temperature: 172 Degrees Fahrenheit - Location: OVEN
Violation Issued: No

Process/Item: Ambient Temp
Temperature: 2 Degrees Fahrenheit - Location: WALK IN FREEZER
Violation Issued: No

Total Orders In This Report	Priority 1	Priority 2	Priority 3
	0	0	4

DISCUSSED ALL ORDERS ON SITE IN ADDITION TO THE FOLLOWING:

- EMPLOYEE ILLNESS LOG AND EXCLUSION POLICY.
- SANITIZER USE AND TEST KITS.
- HAND WASHING POLICY AND REVIEW.
- GLOVE USAGE.
- THERMOMETER USE AND CALIBRATION.
- DATE MARKING.
- PEST CONTROL.

REVIEWED THE SYMPTOMS OF FOODBORNE ILLNESSES AND THE REQUIREMENT TO MAINTAIN A DOCUMENTED RECORD OF ALL INSTANCES OF EMPLOYEES BEING ILL WITH EITHER VOMITING OR DIARRHEA AS REQUIRED BY THE MINNESOTA FOOD CODE & EXCLUDE ILL WORKERS FROM WORKING WITH FOOD & BEVERAGES UNTIL 24 HOURS AFTER SYMPTOMS HAVE ENDED.

****IF ANY STUDENTS OR STAFF COMPLAIN OF ILLNESS, CONTACT THE MINNESOTA DEPARTMENT OF HEALTH AND PROVIDE THE FOODBORNE ILLNESS HOTLINE PHONE NUMBER TO THE CUSTOMER. THE FOODBORNE ILLNESS HOTLINE PHONE NUMBER IS 1-877-366-3455.**

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

I acknowledge receipt of the inspection report number 1036221094 of 11/09/22.


Certified Food Protection Manager: Kristine Mamer

Certification Number: FM38916 Expires: 04/22/25

Inspection report reviewed with person in charge and emailed.

Signed: _____

Kristine Mamer
Kitchen Manager

Signed:  _____

Jeff Johanson

Food Establishment Inspection Report



No. of RF/PHI Categories Out	0	Date	11/09/22
No. of Repeat RF/PHI Categories Out	0	Time In	11:21:34
Legal Authority MN Rules Chapter 4626		Time Out	

Hastings Senior High	Address Brittney Hirschauer, Fd. Ser.	City/State Hastings, MN	Zip Code 55033	Telephone 6514807126
License/Permit # 0015003	Permit Holder Ind. School District No. 200	Purpose of Inspection Full	Est Type	Risk Category M

FOODBORNE ILLNESS RISK FACTORS AND PUBLIC HEALTH INTERVENTIONS

Circle designated compliance status (IN, OUT, N/O, N/A) for each numbered item Mark "X" in appropriate box for COS and/or R

IN= in compliance **OUT**= not in compliance **N/O**= not observed **N/A**= not applicable **COS**= corrected on-site during inspection **R**= repeat violation

Compliance Status		COS	R	Compliance Status		COS	R
Supervision							
1	<input checked="" type="radio"/> IN <input type="radio"/> OUT			18	<input checked="" type="radio"/> IN <input type="radio"/> OUT <input type="radio"/> N/A <input type="radio"/> N/O		
2	<input checked="" type="radio"/> IN <input type="radio"/> OUT <input type="radio"/> N/A			19	<input checked="" type="radio"/> IN <input type="radio"/> OUT <input type="radio"/> N/A <input type="radio"/> N/O		
Employee Health							
3	<input checked="" type="radio"/> IN <input type="radio"/> OUT			20	<input checked="" type="radio"/> IN <input type="radio"/> OUT <input type="radio"/> N/A <input checked="" type="radio"/> N/O		
4	<input checked="" type="radio"/> IN <input type="radio"/> OUT			21	<input checked="" type="radio"/> IN <input type="radio"/> OUT <input type="radio"/> N/A <input type="radio"/> N/O		
5	<input checked="" type="radio"/> IN <input type="radio"/> OUT			22	<input checked="" type="radio"/> IN <input type="radio"/> OUT <input type="radio"/> N/A		
Good Hygienic Practices							
6	<input checked="" type="radio"/> IN <input type="radio"/> OUT <input type="radio"/> N/O			23	<input checked="" type="radio"/> IN <input type="radio"/> OUT <input type="radio"/> N/A <input type="radio"/> N/O		
7	<input checked="" type="radio"/> IN <input type="radio"/> OUT <input type="radio"/> N/O			24	<input checked="" type="radio"/> IN <input type="radio"/> OUT <input checked="" type="radio"/> N/A <input type="radio"/> N/O		
Preventing Contamination by Hands							
8	<input checked="" type="radio"/> IN <input type="radio"/> OUT <input type="radio"/> N/O			Consumer Advisory			
9	<input checked="" type="radio"/> IN <input type="radio"/> OUT <input type="radio"/> N/A <input type="radio"/> N/O			25	<input checked="" type="radio"/> IN <input type="radio"/> OUT <input checked="" type="radio"/> N/A		
10	<input checked="" type="radio"/> IN <input type="radio"/> OUT			Highly Susceptible Populations			
Approved Source							
11	<input checked="" type="radio"/> IN <input type="radio"/> OUT			26	<input checked="" type="radio"/> IN <input type="radio"/> OUT <input checked="" type="radio"/> N/A		
12	<input checked="" type="radio"/> IN <input type="radio"/> OUT <input type="radio"/> N/A <input checked="" type="radio"/> N/O			Food and Color Additives and Toxic Substances			
13	<input checked="" type="radio"/> IN <input type="radio"/> OUT			27	<input checked="" type="radio"/> IN <input type="radio"/> OUT <input checked="" type="radio"/> N/A		
14	<input checked="" type="radio"/> IN <input type="radio"/> OUT <input checked="" type="radio"/> N/A <input type="radio"/> N/O			28	<input checked="" type="radio"/> IN <input type="radio"/> OUT		
Protection from Contamination							
15	<input checked="" type="radio"/> IN <input type="radio"/> OUT <input type="radio"/> N/A <input type="radio"/> N/O			Conformance with Approved Procedures			
16	<input checked="" type="radio"/> IN <input type="radio"/> OUT <input type="radio"/> N/A			29	<input checked="" type="radio"/> IN <input type="radio"/> OUT <input checked="" type="radio"/> N/A		
17	<input checked="" type="radio"/> IN <input type="radio"/> OUT			Risk factors (RF) are improper practices or procedures identified as the most prevalent contributing factors of foodborne illness or injury. Public Health Interventions (PHI) are control measures to prevent foodborne illness or injury.			

GOOD RETAIL PRACTICES

Good Retail Practices are preventative measures to control the addition of pathogens, chemicals, and physical objects into foods.

Mark "X" in box if numbered item is **not** in compliance Mark "X" in appropriate box for COS and/or R **COS**= corrected on-site during inspection **R**= repeat violation

Compliance Status		COS	R	Compliance Status		COS	R
Safe Food and Water							
30	<input checked="" type="radio"/> IN <input type="radio"/> OUT <input checked="" type="radio"/> N/A			Proper Use of Utensils			
31	<input checked="" type="radio"/> IN <input type="radio"/> OUT <input type="radio"/> N/A <input type="radio"/> N/O			43	<input checked="" type="radio"/> IN <input type="radio"/> OUT <input type="radio"/> N/A <input type="radio"/> N/O		
32	<input checked="" type="radio"/> IN <input type="radio"/> OUT <input checked="" type="radio"/> N/A			44	<input checked="" type="radio"/> IN <input type="radio"/> OUT <input type="radio"/> N/A <input type="radio"/> N/O		
Food Temperature Control							
33	<input checked="" type="radio"/> IN <input type="radio"/> OUT <input type="radio"/> N/A <input type="radio"/> N/O			45	<input checked="" type="radio"/> IN <input type="radio"/> OUT <input type="radio"/> N/A <input type="radio"/> N/O		
34	<input checked="" type="radio"/> IN <input type="radio"/> OUT <input type="radio"/> N/A <input checked="" type="radio"/> N/O			46	<input checked="" type="radio"/> IN <input type="radio"/> OUT <input type="radio"/> N/A <input type="radio"/> N/O		
35	<input checked="" type="radio"/> IN <input type="radio"/> OUT <input type="radio"/> N/A <input checked="" type="radio"/> N/O			Utensil Equipment and Vending			
36	<input checked="" type="radio"/> IN <input type="radio"/> OUT <input type="radio"/> N/A <input type="radio"/> N/O			47	<input type="radio"/> IN <input type="radio"/> OUT <input type="radio"/> N/A <input type="radio"/> N/O	<input checked="" type="checkbox"/> X	
Food Identification							
37	<input checked="" type="radio"/> IN <input type="radio"/> OUT <input type="radio"/> N/A <input type="radio"/> N/O			48	<input checked="" type="radio"/> IN <input type="radio"/> OUT <input type="radio"/> N/A <input type="radio"/> N/O		
Prevention of Food Contamination							
38	<input checked="" type="radio"/> IN <input type="radio"/> OUT <input type="radio"/> N/A <input type="radio"/> N/O			49	<input checked="" type="radio"/> IN <input type="radio"/> OUT <input type="radio"/> N/A <input type="radio"/> N/O		
39	<input checked="" type="radio"/> IN <input type="radio"/> OUT <input type="radio"/> N/A <input type="radio"/> N/O			Physical Facilities			
40	<input checked="" type="radio"/> IN <input type="radio"/> OUT <input type="radio"/> N/A <input type="radio"/> N/O			50	<input checked="" type="radio"/> IN <input type="radio"/> OUT <input type="radio"/> N/A <input type="radio"/> N/O		
41	<input checked="" type="radio"/> IN <input type="radio"/> OUT <input type="radio"/> N/A <input type="radio"/> N/O			51	<input checked="" type="radio"/> IN <input type="radio"/> OUT <input type="radio"/> N/A <input type="radio"/> N/O		
42	<input checked="" type="radio"/> IN <input type="radio"/> OUT <input type="radio"/> N/A <input type="radio"/> N/O			52	<input checked="" type="radio"/> IN <input type="radio"/> OUT <input type="radio"/> N/A <input type="radio"/> N/O		
Food Recalls:							
Person in Charge (Signature) Date: 11/10/22							
Inspector (Signature)							