



Type: Full
Date: 10/06/22
Time: 11:49:42
Report: 7962221199

Food and Beverage Establishment Inspection Report

Location:

Red Wing High School
2451 Eagle Ridge Drive
Red Wing, MN55066
Goodhue County, 25

Establishment Info:

ID #: 0024221
Risk: High
Announced Inspection: No

License Categories:

FAIF, FBLB, HOSP, FBSC, FBC2, FBSS-3

Expires on: 12/31/22

Operator:

Red Wing Public School Distric

Phone #: 6513854583
ID #: 30832

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.

5-200A Plumbing: approved materials/design

5-201.11B

MN Rule 4626.1040B Maintain the plumbing system in good repair.

HOSE REEL ABOVE TWO COMPARTMENT SINK, LEFT SIDE, WRAPPED IN DUCT TAPE, DRIPPING

Comply By: 10/13/22

6-500 Physical Facility Maintenance/Operation and Pest Control

6-501.12A

MN Rule 4626.1520A Clean and maintain all physical facilities clean.

DEAD BUGS IN DRY STORAGE ROOM, ENSURE AREA IS BEING SWEEPED THOROUGHLY

Comply By: 10/06/22

Surface and Equipment Sanitizers

Quaternary Ammonia: = 200ppm at Degrees Fahrenheit

Location: wiping cloth buckets

Violation Issued: No

Hot Water: = at 162 Degrees Fahrenheit

Location: thermometer sent through dish machine

Violation Issued: No

Hot Water: = at 187 Degrees Fahrenheit

Location: final rinse thermomete on machine

Violation Issued: No

Type: Full
Date: 10/06/22
Time: 11:49:42
Report: 7962221199
Red Wing High School

Food and Beverage Establishment Inspection Report

Food and Equipment Temperatures

Process/Item: Serving Line Hot
Temperature: 168 Degrees Fahrenheit - Location: macaroni and cheese
Violation Issued: No

Process/Item: Hot Holding
Temperature: 170 Degrees Fahrenheit - Location: hashbrowns
Violation Issued: No

Process/Item: Hot Holding
Temperature: 171 Degrees Fahrenheit - Location: mixed vegetables
Violation Issued: No

Process/Item: Hot Holding
Temperature: 202 Degrees Fahrenheit - Location: meat
Violation Issued: No

Process/Item: Serving Line Hot
Temperature: 196 Degrees Fahrenheit - Location: meat
Violation Issued: No

Process/Item: Upright Cooler
Temperature: 41 Degrees Fahrenheit - Location: double door cooler milk
Violation Issued: No

Process/Item: Walk-In Cooler
Temperature: 40 Degrees Fahrenheit - Location: cut melon
Violation Issued: No

Process/Item: Walk-In Cooler
Temperature: 37 Degrees Fahrenheit - Location: spinach, pint milk
Violation Issued: No

Process/Item: Walk-In Freezer
Temperature: -9 Degrees Fahrenheit - Location: ambient air
Violation Issued: No

Process/Item: Milk Cooler
Temperature: 39 Degrees Fahrenheit - Location: pint milk
Violation Issued: No

Process/Item: Display Cooler
Temperature: 38 Degrees Fahrenheit - Location: milk
Violation Issued: No

Process/Item: Salad Bar Cold Holding
Temperature: 40 Degrees Fahrenheit - Location: melon
Violation Issued: No

Process/Item: Salad Bar Cold Holding
Temperature: 39 Degrees Fahrenheit - Location: sour cream
Violation Issued: No

Type: Full
Date: 10/06/22
Time: 11:49:42
Report: 7962221199
Red Wing High School

Food and Beverage Establishment Inspection Report

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

Establishment Info:

Email all reports to:

Donna Latuff Langhans, Kitchen Manager, dflatuff-langhans@rwps.org

Lisa Pena, Director of Student Nutrition Services, japena@rwps.org

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

I acknowledge receipt of the Minnesota Department of Health inspection report number 7962221199 of 10/06/22.

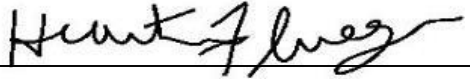
Certified Food Protection Manager Donna Latuff Langhans

Certification Number: FM6397 Expires: 06/07/24

Inspection report reviewed with person in charge and emailed.

Signed: _____

Donna Latuff Langhans
Head Cook

Signed:  _____

Heather Flueger
Public Health Sanitarian
Rochester District Office
507-208-3096
heather.flueger@state.mn.us

Report #: 7962221199

Food Establishment Inspection Report



Minnesota Department of Health
Food Pools and Lodging Services Section
 625 Robert St N
 St. Paul

No. of RF/PHI Categories Out	0	Date	10/06/22
No. of Repeat RF/PHI Categories Out	0	Time In	11:49:42
Legal Authority MN Rules Chapter 4626		Time Out	

Red Wing High School	Address 2451 Eagle Ridge Drive	City/State Red Wing, MN	Zip Code 55066	Telephone 6513854583
License/Permit # 0024221	Permit Holder Red Wing Public School Distric	Purpose of Inspection Full	Est Type	Risk Category H

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	Description	COS	R
Supervision			
1 <input checked="" type="radio"/> IN <input type="radio"/> OUT	PIC knowledgeable; duties & oversight		
2 <input checked="" type="radio"/> IN <input type="radio"/> OUT <input type="radio"/> N/A	Certified food protection manager, duties		
Employee Health			
3 <input checked="" type="radio"/> IN <input type="radio"/> OUT	Mgmt/Staff; knowledge, responsibilities & reporting		
4 <input checked="" type="radio"/> IN <input type="radio"/> OUT	Proper use of reporting, restriction & exclusion		
5 <input checked="" type="radio"/> IN <input type="radio"/> OUT	Procedures for responding to vomiting & diarrheal events		
Good Hygienic Practices			
6 <input checked="" type="radio"/> IN <input type="radio"/> OUT <input type="radio"/> N/O	Proper eating, tasting, drinking, or tobacco use		
7 <input checked="" type="radio"/> IN <input type="radio"/> OUT <input type="radio"/> N/O	No discharge from eyes, nose, & mouth		
Preventing Contamination by Hands			
8 <input checked="" type="radio"/> IN <input type="radio"/> OUT <input type="radio"/> N/O	Hands clean & properly washed		
9 <input checked="" type="radio"/> IN <input type="radio"/> OUT <input type="radio"/> N/A <input type="radio"/> N/O	No bare hand contact with RTE foods or pre-approved alternate procedure properly followed		
10 <input checked="" type="radio"/> IN <input type="radio"/> OUT	Adequate handwashing sinks supplied/accessible		
Approved Source			
11 <input checked="" type="radio"/> IN <input type="radio"/> OUT	Food obtained from approved source		
12 <input type="radio"/> IN <input type="radio"/> OUT <input type="radio"/> N/A <input checked="" type="radio"/> N/O	Food received at proper temperature		
13 <input checked="" type="radio"/> IN <input type="radio"/> OUT	Food in good condition, safe, & unadulterated		
14 <input type="radio"/> IN <input type="radio"/> OUT <input checked="" type="radio"/> N/A <input type="radio"/> N/O	Required records available; shellstock tags, parasite destruction		
Protection from Contamination			
15 <input checked="" type="radio"/> IN <input type="radio"/> OUT <input type="radio"/> N/A <input type="radio"/> N/O	Food separated and protected		
16 <input checked="" type="radio"/> IN <input type="radio"/> OUT <input type="radio"/> N/A	Food contact surfaces: cleaned & sanitized		
17 <input checked="" type="radio"/> IN <input type="radio"/> OUT	Proper disposition of returned, previously served, reconditioned, & unsafe food		

Compliance Status	Description	COS	R
Time/Temperature Control for Safety			
18 <input type="radio"/> IN <input type="radio"/> OUT <input type="radio"/> N/A <input checked="" type="radio"/> N/O	Proper cooking time & temperature		
19 <input type="radio"/> IN <input type="radio"/> OUT <input type="radio"/> N/A <input checked="" type="radio"/> N/O	Proper reheating procedures for hot holding		
20 <input type="radio"/> IN <input type="radio"/> OUT <input type="radio"/> N/A <input checked="" type="radio"/> N/O	Proper cooling time & temperature		
21 <input checked="" type="radio"/> IN <input type="radio"/> OUT <input type="radio"/> N/A <input type="radio"/> N/O	Proper hot holding temperatures		
22 <input checked="" type="radio"/> IN <input type="radio"/> OUT <input type="radio"/> N/A	Proper cold holding temperatures		
23 <input checked="" type="radio"/> IN <input type="radio"/> OUT <input type="radio"/> N/A <input type="radio"/> N/O	Proper date marking & disposition		
24 <input type="radio"/> IN <input type="radio"/> OUT <input checked="" type="radio"/> N/A <input type="radio"/> N/O	Time as a public health control: procedures & records		
Consumer Advisory			
25 <input type="radio"/> IN <input type="radio"/> OUT <input checked="" type="radio"/> N/A	Consumer advisory provided for raw/undercooked food		
Highly Susceptible Populations			
26 <input checked="" type="radio"/> IN <input type="radio"/> OUT <input type="radio"/> N/A	Pasteurized foods used; prohibited foods not offered		
Food and Color Additives and Toxic Substances			
27 <input type="radio"/> IN <input type="radio"/> OUT <input checked="" type="radio"/> N/A	Food additives: approved & properly used		
28 <input checked="" type="radio"/> IN <input type="radio"/> OUT	Toxic substances properly identified, stored, & used		
Conformance with Approved Procedures			
29 <input type="radio"/> IN <input type="radio"/> OUT <input checked="" type="radio"/> N/A	Compliance with variance/specialized process/HACCP		

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	Description	COS	R
Safe Food and Water			
30 <input type="radio"/> IN <input type="radio"/> OUT <input checked="" type="radio"/> N/A	Pasteurized eggs used where required		
31 <input type="radio"/> IN <input type="radio"/> OUT <input type="radio"/> N/A <input type="radio"/> N/O	Water & ice obtained from an approved source		
32 <input type="radio"/> IN <input type="radio"/> OUT <input checked="" type="radio"/> N/A	Variance obtained for specialized processing methods		
Food Temperature Control			
33 <input type="radio"/> IN <input type="radio"/> OUT <input type="radio"/> N/A <input type="radio"/> N/O	Proper cooling methods used; adequate equipment for temperature control		
34 <input type="radio"/> IN <input type="radio"/> OUT <input type="radio"/> N/A <input checked="" type="radio"/> N/O	Plant food properly cooked for hot holding		
35 <input checked="" type="radio"/> IN <input type="radio"/> OUT <input type="radio"/> N/A <input type="radio"/> N/O	Approved thawing methods used		
36 <input type="radio"/> IN <input type="radio"/> OUT <input type="radio"/> N/A <input type="radio"/> N/O	Thermometers provided & accurate		
Food Identification			
37 <input type="radio"/> IN <input type="radio"/> OUT <input type="radio"/> N/A <input type="radio"/> N/O	Food properly labeled; original container		
Prevention of Food Contamination			
38 <input type="radio"/> IN <input type="radio"/> OUT <input type="radio"/> N/A <input type="radio"/> N/O	Insects, rodents, & animals not present		
39 <input type="radio"/> IN <input type="radio"/> OUT <input type="radio"/> N/A <input type="radio"/> N/O	Contamination prevented during food prep, storage & display		
40 <input type="radio"/> IN <input type="radio"/> OUT <input type="radio"/> N/A <input type="radio"/> N/O	Personal cleanliness		
41 <input type="radio"/> IN <input type="radio"/> OUT <input type="radio"/> N/A <input type="radio"/> N/O	Wiping cloths: properly used & stored		
42 <input type="radio"/> IN <input type="radio"/> OUT <input type="radio"/> N/A <input type="radio"/> N/O	Washing fruits & vegetables		

Compliance Status	Description	COS	R
Proper Use of Utensils			
43 <input type="radio"/> IN <input type="radio"/> OUT <input type="radio"/> N/A <input type="radio"/> N/O	In-use utensils: properly stored		
44 <input type="radio"/> IN <input type="radio"/> OUT <input type="radio"/> N/A <input type="radio"/> N/O	Utensils, equipment & linens: properly stored, dried, & handled		
45 <input type="radio"/> IN <input type="radio"/> OUT <input type="radio"/> N/A <input type="radio"/> N/O	Single-use/single service articles: properly stored & used		
46 <input type="radio"/> IN <input type="radio"/> OUT <input type="radio"/> N/A <input type="radio"/> N/O	Gloves used properly		
Utensil Equipment and Vending			
47 <input type="radio"/> IN <input type="radio"/> OUT <input type="radio"/> N/A <input type="radio"/> N/O	Food & non-food contact surfaces cleanable, properly designed, constructed, & used		
48 <input type="radio"/> IN <input type="radio"/> OUT <input type="radio"/> N/A <input type="radio"/> N/O	Warewashing facilities: installed, maintained, & used; test strips		
49 <input type="radio"/> IN <input type="radio"/> OUT <input type="radio"/> N/A <input type="radio"/> N/O	Non-food contact surfaces clean		
Physical Facilities			
50 <input type="radio"/> IN <input type="radio"/> OUT <input type="radio"/> N/A <input type="radio"/> N/O	Hot & cold water available; adequate pressure		
51 <input checked="" type="radio"/> X <input type="radio"/> IN <input type="radio"/> OUT <input type="radio"/> N/A <input type="radio"/> N/O	Plumbing installed; proper backflow devices		
52 <input type="radio"/> IN <input type="radio"/> OUT <input type="radio"/> N/A <input type="radio"/> N/O	Sewage & waste water properly disposed		
53 <input type="radio"/> IN <input type="radio"/> OUT <input type="radio"/> N/A <input type="radio"/> N/O	Toilet facilities: properly constructed, supplied, & cleaned		
54 <input type="radio"/> IN <input type="radio"/> OUT <input type="radio"/> N/A <input type="radio"/> N/O	Garbage & refuse properly disposed; facilities maintained		
55 <input checked="" type="radio"/> X <input type="radio"/> IN <input type="radio"/> OUT <input type="radio"/> N/A <input type="radio"/> N/O	Physical facilities installed, maintained, & clean		
56 <input type="radio"/> IN <input type="radio"/> OUT <input type="radio"/> N/A <input type="radio"/> N/O	Adequate ventilation & lighting; designated areas used		
57 <input type="radio"/> IN <input type="radio"/> OUT <input type="radio"/> N/A <input type="radio"/> N/O	Compliance with MCIAA		
58 <input type="radio"/> IN <input type="radio"/> OUT <input type="radio"/> N/A <input type="radio"/> N/O	Compliance with licensing & plan review		

Food Recalls:

Person in Charge (Signature)

Date: 10/06/22

Inspector (Signature)

Hunt J. [Signature]