

# Standard Inspection Report

Authority: Chapters 3717 and 3715 Ohio Revised Code

Name of facility <b>Union City Headstart</b>	Check one <input checked="" type="checkbox"/> FSO <input type="checkbox"/> RFE	License number <b>103</b>	Date <b>11-27-17</b>
Address <b>117 Franklin St. Union City</b>	Category/Descriptive <b>C33</b>		
License holder <b>Union City Headstart</b>	Inspection time (min)	Travel time (min)	Other
Type of visit (check) <input checked="" type="checkbox"/> Standard <input type="checkbox"/> Follow up <input type="checkbox"/> Foodborne <input type="checkbox"/> 30 day <input type="checkbox"/> Complaint <input type="checkbox"/> Prelicensing <input type="checkbox"/> Consultation <input type="checkbox"/> Other specify	Follow-up date (if required)		Sample date/result (if required)

### 3717-1 OAC Violation Checked

#### Management and Personnel

<input type="checkbox"/>	2.1	Employee health
<input type="checkbox"/>	2.2	Personal cleanliness
<input checked="" type="checkbox"/>	2.3	Hygienic practices
<input type="checkbox"/>	2.4	Supervision

#### Food

<input type="checkbox"/>	3.0	Safe, unadulterated and honestly presented
<input type="checkbox"/>	3.1	Sources, specifications and original containers
<input checked="" type="checkbox"/>	3.2	Protection from contamination after receiving
<input type="checkbox"/>	3.3	Destruction of organisms
<input type="checkbox"/>	3.4	Limitation of growth of organisms
<input type="checkbox"/>	3.5	Identity, presentation, on premises labeling
<input type="checkbox"/>	3.6	Discarding or reconditioning unsafe, adulterated
<input type="checkbox"/>	3.7	Special requirements for highly susceptible populations

#### Equipment, Utensils, and Linens

<input type="checkbox"/>	4.0	Materials for construction and repair
<input type="checkbox"/>	4.1	Design and construction
<input type="checkbox"/>	4.2	Numbers and capacities
<input type="checkbox"/>	4.3	Location and installation

<input type="checkbox"/>	4.4	Maintenance and operation
<input type="checkbox"/>	4.5	Cleaning of equipment and utensils
<input type="checkbox"/>	4.6	Sanitizing of equipment and utensils
<input type="checkbox"/>	4.7	Laundrying
<input checked="" type="checkbox"/>	4.8	Protection of clean items

#### Water, Plumbing, and Waste

<input checked="" type="checkbox"/>	5.0	Water
<input checked="" type="checkbox"/>	5.1	Plumbing system
<input type="checkbox"/>	5.2	Mobile water tanks
<input type="checkbox"/>	5.3	Sewage, other liquid waste and rainwater
<input type="checkbox"/>	5.4	Refuse, recyclables, and returnables

#### Physical Facilities

<input type="checkbox"/>	6.0	Materials for construction and repair
<input type="checkbox"/>	6.1	Design, construction, and installation
<input type="checkbox"/>	6.2	Numbers and capacities
<input type="checkbox"/>	6.3	Location and placement
<input type="checkbox"/>	6.4	Maintenance and operation

#### Poisonous or Toxic Materials

<input type="checkbox"/>	7.0	Labeling and identification
<input type="checkbox"/>	7.1	Operational supplies and applications
<input type="checkbox"/>	7.2	Storage and display separation

#### Special Requirements

<input type="checkbox"/>	8.0	Fresh juice production
<input type="checkbox"/>	8.1	Heat treatment dispensing freezers
<input type="checkbox"/>	8.2	Custom processing
<input type="checkbox"/>	8.3	Bulk water machine criteria
<input type="checkbox"/>	8.4	Acidified white rice preparation criteria
<input type="checkbox"/>	9.0	Facility layout and equipment specifications
<input type="checkbox"/>	20	Existing facilities and equipment

#### Administrative

<input type="checkbox"/>	901:3-4 OAC
<input type="checkbox"/>	3701:21 OAC

\* Critical Violations

#### Violation(s)/Comment(s)

3.2 A 4c - Observed no public health policy on hand. Will email example to Todd.

\* 5.1 0 1 + 2 - Observed dishes drying in handwashing sink. This sink shall remain accessible at all times + used for handwashing only

2.3 C observed no hair restraint on person preparing food. Food employees shall wear hair restraints

4.8 A - Observed clean dishes drying on top of cloth mats that are not cleaned on a regular basis. Equipment/utensils shall be air-dried after cleaning/sanitizing

Inspected by <b>Jepher Hulley</b>	R.S./SIT # <b>3465</b>	Licenser <b>Darke County</b>
Received by <b>Todd Smith</b>	Title	Phone