

Type: Full
Date: 03/12/24
Time: 10:00:00
Report: 6504241080

Food and Beverage Establishment Inspection Report

Page 1

Location:

Northfield High School
Cecelia Green, Child Nutrition
1400 Division Street South
Northfield, MN55057
Rice County, 66

Establishment Info:

ID #: 0013897
Risk: High
Announced Inspection: No

License Categories:

FAIF, FBLB, HOSP, FBSC, FBSS, FBC2

Expires on: 12/31/24

Operator:

Ind. School District No. 659

Phone #: 5076630604
ID #: 15696

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 2	Priority 3
		0	0	0

WALK-IN COOLER: 32F; WALK-IN FREEZER: -2F; PRODUCE WALK-IN COOLER: 34F;
TRAULSEN REFRIGERATOR: #3,34F: #10,37F: #5,31F: TRAULSEN FREEZER #4, -2F; BAKER
REFRIGERATOR #9, 37F; MILK COOLER: 39F.

REPORT E-MAILED TO; sstromme@northfieldschools.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 6504241080 of 03/12/24.

Certified Food Protection Manager Cecelia E. Green

Certification Number: 45210 Expires: 07/10/26

Inspection report reviewed with person in charge and emailed.

Signed: E-mailed

Cecelia Green
FSD

Signed: David W. Reimann

David W. Reimann R.S.
Environmental Health Spec III
Mankato District Office
507-344-2727
david.reimann@state.mn.us

Food Establishment Inspection Report



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

No. of RF/PHI Categories Out

0

Date 03/12/24

No. of Repeat RF/PHI Categories Out

0

Time In 10:00:00

Legal Authority MN Rules Chapter 4626

Time Out

Northfield High School

Address

Cecelia Green, Child Nutrition

City/State

Northfield, MN

Zip Code

55057

Telephone

5076630604

License/Permit #

0013897

Permit Holder

Ind. School District No. 659

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		COS	R
Supervision			
1	IN OUT		
2	IN OUT N/A		
Employee Health			
3	IN OUT		
4	IN OUT		
5	IN OUT		
Good Hygienic Practices			
6	IN OUT N/O		
7	IN OUT N/O		
Preventing Contamination by Hands			
8	IN OUT N/O		
9	IN OUT N/A N/O		
10	IN OUT		
Approved Source			
11	IN OUT		
12	IN OUT N/A N/O		
13	IN OUT		
14	IN OUT N/A N/O		
Protection from Contamination			
15	IN OUT N/A N/O		
16	IN OUT N/A		
17	IN OUT		

Compliance Status		COS	R
Time/Temperature Control for Safety			
18	IN OUT N/A N/O		
19	IN OUT N/A N/O		
20	IN OUT N/A N/O		
21	IN OUT N/A N/O		
22	IN OUT N/A		
23	IN OUT N/A N/O		
24	IN OUT N/A N/O		
Consumer Advisory			
25	IN OUT N/A		
Highly Susceptible Populations			
26	IN OUT N/A		
Food and Color Additives and Toxic Substances			
27	IN OUT N/A		
28	IN OUT		
Conformance with Approved Procedures			
29	IN OUT N/A		

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
Safe Food and Water			
30	IN OUT N/A		
31			
32	IN OUT N/A		
Food Temperature Control			
33			
34	IN OUT N/A N/O		
35	IN OUT N/A N/O		
36			
Food Identification			
37			
Prevention of Food Contamination			
38			
39			
40			
41			
42			

Compliance Status		COS	R
Proper Use of Utensils			
43			
44			
45			
46			
Utensil Equipment and Vending			
47			
48			
49			
Physical Facilities			
50			
51			
52			
53			
54			
55			
56			
57			
58			

Food Recalls:

Person in Charge (Signature)

E-mailed

Date: 03/12/24

Inspector (Signature)