



DPI School Inspection Report

Inspection Information			
School Name VALLEY VIEW	2200 TRUE LANE GREEN BAY, WI 54304	HSAT-7QWV69	Sanitarian Marty Adams
Person In Charge Carie Lohman	Contact Person Carie Lohman	Telephone # (920)-492 2935	Inspection Date (Current Date) 04-Apr-2017
School District Ashwaubenon	Operator Certified <input type="radio"/> No <input checked="" type="radio"/> Yes	Name Of Operator Carie Lohman	Inspection Type Second Inspection
Food Safety Plan Onsite <input type="radio"/> No <input checked="" type="radio"/> Yes	Plan Last Reviewed By Food Service Authority 25-Aug-2016		

Smoking

Food Safety Program	Employee Information	Types Of Equipment
Food Service Authority Description Facility Type <input type="radio"/> No <input checked="" type="radio"/> Yes	<input type="radio"/> No <input checked="" type="radio"/> Yes	<input type="radio"/> No <input checked="" type="radio"/> Yes

Written Standard Operating Procedure (SOP) - (Review Three)	SOP Name	SOP Name	SOP Name
SOP Components	#17 Holding TCS Foods	#21 Cleaning & Sanitizing Food contact Surfaces	#26 Reheating Fully cooked TCS Foods
(Policy and Procedure May Include Critical Limits)	<input type="radio"/> No <input checked="" type="radio"/> Yes	<input type="radio"/> No <input checked="" type="radio"/> Yes	<input type="radio"/> No <input checked="" type="radio"/> Yes
Monitoring Instructions	<input type="radio"/> No <input checked="" type="radio"/> Yes	<input type="radio"/> No <input checked="" type="radio"/> Yes	<input type="radio"/> No <input checked="" type="radio"/> Yes
Recording Instructions	<input type="radio"/> No <input checked="" type="radio"/> Yes	<input type="radio"/> No <input checked="" type="radio"/> Yes	<input type="radio"/> No <input checked="" type="radio"/> Yes
Corrective Action Procedures	<input type="radio"/> No <input checked="" type="radio"/> Yes	<input type="radio"/> No <input checked="" type="radio"/> Yes	<input type="radio"/> No <input checked="" type="radio"/> Yes

Written Plan Using HACCP Principles	Process	Comments
<input type="radio"/> Yes <input type="radio"/> No		
Menu Items Categorized by Process	Process 1 - No Cook <input type="radio"/> No <input checked="" type="radio"/> Yes Process 2 - Same Day Service <input type="radio"/> No <input checked="" type="radio"/> Yes Process 3- Complex Food Preparation <input type="radio"/> No <input checked="" type="radio"/> Yes	
Each Process Identifies	Critical Control Points (CCP's) <input type="radio"/> No <input checked="" type="radio"/> Yes Critical Limits Established <input type="radio"/> No <input checked="" type="radio"/> Yes	

Record three random dates within the last inspection period, give an over all review for each of the categories. "Yes" if in compliance, "No" if not in compliance, note in comments.

Records Review	Date	Date	Date
	17-Nov-2016	12-Jan-2017	20-Dec-2016
Temperatures monitored and recorded.	<input type="radio"/> No <input checked="" type="radio"/> Yes	<input type="radio"/> No <input checked="" type="radio"/> Yes	<input type="radio"/> No <input checked="" type="radio"/> Yes
Temperature record accurate and consistent.	<input type="radio"/> No <input checked="" type="radio"/> Yes	<input type="radio"/> No <input checked="" type="radio"/> Yes	<input type="radio"/> No <input checked="" type="radio"/> Yes
Corrective actions documented.	<input type="radio"/> No <input checked="" type="radio"/> Yes	<input type="radio"/> No <input checked="" type="radio"/> Yes	<input type="radio"/> No <input checked="" type="radio"/> Yes
Employee food safety training program in place.	<input type="radio"/> No <input checked="" type="radio"/> Yes	<input type="radio"/> No <input checked="" type="radio"/> Yes	<input type="radio"/> No <input checked="" type="radio"/> Yes

Comments
 Good records on site.

Person in Charge

Sanitarian

MR Engles

Marty Adams R.S.

Marty Adams
 (920) 448-6417