



DPI School Inspection Report

Inspection Information			
School Name PARKVIEW MIDDLE SCHOOL	955 WILLARD DR GREEN BAY , WI 54304	HSAT-7QX769	Sanitarian Mawuenam Matti
Person In Charge Susan Olbrantz	Contact Person Kaitlin Tauriainen	Telephone # (920)-246-7255	Inspection Date (Current Date) 02/24/2026
School District Ashwaubenon	Operator Certified <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	Name Of Operator Susan Olbrantz	Inspection Type Second Inspection
Food Safety Plan Onsite <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	Plan Last Reviewed By Food Service Authority 03/08/2024		

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

Written Standard Operating Procedure (SOP)	SOP Name	SOP Name	SOP Name
- (Review Three)			
SOP Components	#29 Leftovers / Items Prepared Prior Day	#16 Date Marking	#5 Using and Calibrating Food Thermometers
(Policy and Procedure May Include Critical Limits)	<input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No <input checked="" type="checkbox"/> Yes
Monitoring Instructions	<input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No <input checked="" type="checkbox"/> Yes
Recording Instructions	<input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No <input checked="" type="checkbox"/> Yes
Corrective Action Procedures	<input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No <input checked="" type="checkbox"/> Yes

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

Recor ds Review	Date	Date	Date
	02/24/2026	12/05/2025	09/17/2025
Temperatures monitored and recorded.	<input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
Temperature record accurate and consistent.	<input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
Corrective actions documented.	<input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No <input checked="" type="checkbox"/> Yes
Employee food safety training program in place.	<input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No <input checked="" type="checkbox"/> Yes

Comments

*HACCP plan is not updated annually. Last updated information was 3/8/2024.
 * Please update employee information to reflect the correct PIC for each school. For example, Lois Ludwig is now at Pioneer while Susan Olbrantz is at Parkview.
 * Signed employee health reporting agreement forms were available for review.
 *Food temperature temps for 9/2 -9/12 missing from the breakfast temps log.
 *Second thermometer calibration temp not recorded.
 *Overall, great recordkeeping. Great job. Keep up the good work!

Person in Charge

Sanitarian



Name
Susan Olbrantz
 Title
Head Cook



Mawuenam Matti
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