Office of Health Protection 600 East Capitol Avenue Pierre, SD 57501 PH (605) 773-4945

## **Department of Health - Food Service Inspection Report**

**Establishment Name EVANS PLUNGE** 

City Hot Springs SD

Owner Name CITY OF HOT SPRINGS

License # 12730

Address 1145 River ST Zip Code

Insp. Date 1/10/2024

Water Supply

Inspector Number

Purpose of Inspection: Routine

| Item |   | Weight | Item              |  | Weight | Item |   | Weigh |
|------|---|--------|-------------------|--|--------|------|---|-------|
|      | PERSONNEL   |        |                   | FOOD DISPLAY, SERVICE AND  |        |      | WASH AND RINSE WATER  |       |
|      | PERSON IN CHARGE  |        |                   | TRANSPORT  |        | 29   | Clean, proper temperature,                                    | 2/2   |
| 1 *  | Available, knowledgeable, certified manager   | 4/4    | 15 *              | Hot holding and cold holding 5/5 temperatures maintained, unwrapped food not reserved        |        |      | cleaning agent SANITIZATION                                   |       |
|      | EMPLOYEE HEALTH   |        |                   |  |        | 30 * | Method, clean, temp,  | 4/4   |
| 2 *  | Healthy, restrictions and exclusions followed                                       | 4/4    |                   | COOLING OF POTENTIALLY HAZARDOUS FOOD  |        |      | concentration, exposure time, equipment/utensils sanitized    |       |
|      | EMPLOYEE HYGIENE  |        | 16 *              | Method, temperature and time 5/5   |        |      | STORAGE/HANDLING CLEAN  |       |
| 3 *  | Handwashing, good hygienic  | 5/5    |                   | FOOD PREP  |        |      | EQUIPMENT AND UTENSILS  |       |
| 3    | practices  EMPLOYEE PRACTICES   | 3/3    | 17                | Fruits and vegetables washed, handling, sink provided  | 1/1    | 31   | Clean dry location, protected  SINGLE-USE/SINGLE-SERVICE      | 1/1   |
|      |   |        |                   | MILK PRODUCTS AND  |        |      | ARTICLES  |       |
| 4    | Clean clothes, hair restraints, fingernail maint., jewelry,                         | 1/1    | NONDAIRY PRODUCTS |  |        | 32   | Proper storage, no-reuse                                      | 1/1   |
|      | eating/drinking   |        | 18                | Proper dispensing methods  | 1/1    |      | LINENS  |       |
|      | FOOD SOURCE   |        |                   | READY TO EAT POTENTIALLY HAZARDOUS FOOD, DATE  |        | 33   | Laundered, proper handling, and storage                       | 1/1   |
|      | FOOD SOURCE   |        | - 10              | MARKING AND DISPOSITION  | 0/0    |      | PLUMBING  |       |
| 5 *  | Approved, safe, unadulterated, 4/4 approved additives, proper receiving temperature |        | 19                | Date marking accomplished, discarded   | 2/2    |      | WATER SUPPLY  |       |
|      |   |        |                   | FOOD EQUIPMENT & UTENSILS  |        | 34 * | Safe, adequate, tested  | 4/4   |
|      | FOOD PROTECTION   |        |                   | FOOD-CONTACT SURFACES  |        |      | PLUMBING SYSTEM   |       |
|      | CONTAMINATION BY EMPLOYEES  |        | 20                | Designed, constructed, installed,  | 2/2    | 35   | Installed, maintained   | 1/1   |
| 6 *  | Bare hand contact avoided, single-<br>use gloves, and utensils used                 | 3/3    |                   | and maintained   | _,_    | 00 # | CROSS-CONNECTION  | 0.15  |
|      | CONTAMINATION DURING<br>STORGAGE  |        |                   | NONFOOD-CONTACT<br>SURFACES  |        | 36 * | Backflow prevention, back siphonage                           | 3/3   |
| 7    | Clean/dry location, protected,  | 2/2    | 21                | Designed, constructed, installed, and maintained   | 1/1    |      | HANDWASHING LAVATORIES<br>AND SUPPLIES                        |       |
|      | covered, original containers, labeled   |        |                   | FOOD-CONTACT SURFACES  |        | 37 * | Number, location, accessibility,                              | 3/3   |
| 8 *  | CROSS CONTAMINATION   | 5/5    | 22                | Cleaning frequency, maintained clean   | 2/2    |      | soap and paper towels provided                                |       |
| 0    | Prevented, separated, segregated  IN-USE UTENSILS                                   | 5/5    |                   | NONFOOD-CONTACT  |        | 20   | TOILET FACILITIES   | 4/4   |
| 9    |   | 1/1    |                   | SURFACES   |        | 38   | Clean, maintained, tissue, vented, self-closing door          | 1/1   |
| 9    | Storage, properly handled  CONTAMINATION FROM WIPING                                | 1/1    | 23                | Cleaning frequency, maintained 1/1   |        |      | OTHER OPERATIONS  |       |
|      | CLOTHS CLOTHS   |        |                   | clean  |        |      | REFUSE STORAGE  |       |
| 10   | Clean, proper use, storage, sanitizing  | 2/2    |                   | VENTILATION HOOD SYSTEM  |        | 39   | Receptacles, covers/lids,                                     | 1/1   |
|      | solution  CONTAMINATION BY CONSUMERS  |        | 24                | Provided as required, designed, constructed, installed, maintained, and cleaned              |        |      | adequate number, clean, insect/rodent proof, storage,         | "     |
| 11   | Food display protection, condiment  | 1/1    |                   |  |        |      | frequency, maintained   |       |
|      | protection, clean tableware usage,  |        |                   | DISPENSING EQUIPMENT   |        |      | FLOORS, WALLS, CEILINGS                                       |       |
|      | sign posted  COLD AND HOT STORAGE   |        | 25                | Design, installation, clean, and maintained  | 1/1    | 40   | Design, construction, clean, maintained                       | 1/1   |
|      | EQUIPMENT   |        |                   | TEMPERATURE MEASURING DEVICES  |        |      | LIGHTING  |       |
| 12 * | Available, adequate capacity, able to maintain proper temperature                   | 4/4    | 26                | Thermometers provided, used,   | 1/1    | 41   | Adequate, shielded, maintained PREMISES                       | 1/1   |
|      | THAWING POTENTIALLY HAZARDOUS FOOD  |        |                   | clean, and accurate  DISHWASHING FACILITIES  |        | 42   | Clean, employee dressing area,                                | 1/1   |
| 13   | Appropriate procedures  | 2/2    | 27                | Properly designed, located, constructed, operated, maintained, cleaned and chemical test kit |        |      | cleaning equipment storage, living/sleeping quarters separate |       |
|      | COOKING POTENTIALLY HAZARDOUS FOOD  | -      |                   |  |        |      | POISONS/TOXIC MATERIALS<br>AND MEDICINE                       |       |
| 14 * | Cooking and reheating to the proper   | 5/5    |                   | provided   |        | 43 * | Proper storage, labeling, use                                 | 3/3   |
|      | time and temperature  |        | 28                | WASH PRETREATMENT  Utensils scraped, preflushed, 1/1   |        |      | INSECT, RODENT, ANIMAL CONTROL                                | 0,0   |
|      |   |        |                   | soaked   |        | 44 * | Provided, maintained  | 3/3   |

Overall Inspection Rating SCORE: (100 less weight of items violated)

100

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Inspector Number 599

Purpose of Inspection: Routine

| Sanitizer Readings |                   |  |  |  |  |  |
|--------------------|-------------------|--|--|--|--|--|
| SampleID           | Sanitizer Reading |  |  |  |  |  |
| Saniti Spray       | 300ppm QT         |  |  |  |  |  |

| TEMPERATURE OBSERVATIONS |          |      |        |               |       |      |          |      |  |
|--------------------------|----------|------|--------|---------------|-------|------|----------|------|--|
| Item                     | Location | Temp | Item   | Location      | Temp  | Item | Location | Temp |  |
| Hot Dogs                 | Freezer  | 0°F  | Cheese | Hot-Hold Unit | 143°F |      |          | ٥    |  |

| Received By | Signature | Sig. Date | Inspected By     | Signature    | Sig. Date |
|-------------|-----------|-----------|------------------|--------------|-----------|
| Bobbie      | Rdi Ant   | 1/10/2024 | Meredith Schrier | Month Schaue | 1/10/2024 |

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