### Food Inspection Report

**State of Ohio**  
Food Inspection Report  
Authority: Chapters 3717 and 3715 Ohio Revised Code

<table>
<thead>
<tr>
<th>Name of facility</th>
<th>Check one</th>
<th>License Number</th>
<th>Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>WOODEN SHOE INN, INC.</td>
<td>FSO</td>
<td>174</td>
<td>10/24/2019</td>
</tr>
</tbody>
</table>

**Address**  
6 N. MAIN ST.

**City/Zip Code**  
MINSTER  45865

**License Number**  
174

**Travel Time**  
25

**Category/Descriptive**  
COMMERCIAL CLASS 4 <25,000 SQ. FT.

**Type of inspection (check all that apply)**  
- [x] Standard  
- [x] Critical Control Point (FSO)  
- [x] Process Review (RFE)  
- [ ] Variance Review  
- [x] Follow Up  
- [ ] Foodborne  
- [ ] 30 Day  
- [ ] Complaint  
- [ ] Pre-licensing  
- [ ] Consultation

**Follow-up date (if required)**  
/ /  

**Water sample date/result (if required)**  
/ /  

### Foodborne Illness Risk Factors and Public Health Interventions

Mark designated compliance status (IN, OUT, N/O, N/A) for each numbered item:  
- IN = in compliance  
- OUT = not in compliance  
- N/O = not observed  
- N/A = not applicable

#### Compliance Status

<table>
<thead>
<tr>
<th>Compliance Status</th>
<th>Time/Temperature Controlled for Safety Food (TCS food)</th>
</tr>
</thead>
</table>
| Supervision  
1. IN | OUT | N/A | Proper date marking and disposition  
2. IN | OUT | N/A | Time as a public health control: procedures & records  
| Employee Health  
3. IN | OUT | N/A | Management, food employees and conditional employee; knowledge, responsibilities and reporting  
4. IN | OUT | N/A | Proper use of restriction and exclusion  
5. IN | OUT | N/A | Procedures for responding to vomiting and diarrheal events  
| Good Hygienic Practices  
6. IN | OUT | N/O | Proper eating, tasting, drinking, or tobacco use  
7. IN | OUT | N/O | No discharge from eyes, nose, and mouth  
| Preventing Contamination by Hands  
8. IN | OUT | N/O | Hands clean and properly washed  
9. N/A | OUT | N/O | No bare hand contact with ready-to-eat foods or approved alternate method properly followed  
10. IN | OUT | N/A | Adequate handwashing facilities supplied & accessible  
| Approved Source  
11. IN | OUT | Food obtained from approved source  
12. IN | OUT | N/A | Food received at proper temperature  
13. IN | OUT | N/A | Food in good condition, safe, and unadulterated  
14. IN | OUT | N/A | Required records available: shellstock tags, parasite destruction  
| Protection from Contamination  
15. IN | OUT | N/A | Food separated and protected  
16. IN | OUT | N/A | Food-contact surfaces: cleaned and sanitized  
17. IN | OUT | N/A | Proper disposition of returned, previously served, reconditioned, and unsafe food  
| Time/Temperature Controlled for Safety Food (TCS food)  
18. IN | OUT | N/A | Proper cooking time and temperatures  
19. IN | OUT | N/A | Proper reheating procedures for hot holding  
20. IN | OUT | N/A | Proper cooling time and temperatures  
21. IN | OUT | N/A | Proper hot holding temperatures  
22. IN | OUT | N/A | Proper cold holding temperatures  

#### Risk Factors

- Food preparation practices and employee behaviors that are identified as the most significant contributing factors to foodborne illness.

#### Public Health Interventions

- Control measures to prevent foodborne illness or injury.
State of Ohio
Food Inspection Report
Authority: Chapters 3717 and 3715 Ohio Revised Code

Name of Facility
WOODEN SHOE INN, INC.

Type of Inspection
sta ccp flwup

Date
10/24/2019

GOOD RETAIL PRACTICES

Good Retail Practices are preventative measures to control the introduction of pathogens, chemicals, and physical objects into foods. Mark designated compliance status (IN, OUT, NO, N/A) for each numbered item: IN = in compliance OUT = not in compliance NO = not observed N/A = not applicable

<table>
<thead>
<tr>
<th>Safe Food and Water</th>
<th>Utensils, Equipment and Vending</th>
</tr>
</thead>
<tbody>
<tr>
<td>38 IN OUT N/A N/O</td>
<td>Pasteurized eggs used where required</td>
</tr>
<tr>
<td>39 IN OUT</td>
<td>Water and ice from approved source</td>
</tr>
<tr>
<td>40 IN OUT N/A N/O</td>
<td>Proper cooling methods used; adequate equipment for temperature control</td>
</tr>
<tr>
<td>41 IN OUT N/A N/O</td>
<td>Plant food properly cooked for hot holding</td>
</tr>
<tr>
<td>42 IN OUT N/A N/O</td>
<td>Approved thawing methods used</td>
</tr>
<tr>
<td>43 IN OUT N/A</td>
<td>Thermometers provided and accurate</td>
</tr>
<tr>
<td>44 IN OUT</td>
<td>Food properly labeled; original container</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Food Temperature Control</th>
<th>Food Identification</th>
</tr>
</thead>
<tbody>
<tr>
<td>45 IN OUT</td>
<td>Insects, rodents, and animals not present/outer openings protected</td>
</tr>
<tr>
<td>46 IN OUT</td>
<td>Contamination prevented during food preparation, storage &amp; display</td>
</tr>
<tr>
<td>47 IN OUT</td>
<td>Personal cleanliness</td>
</tr>
<tr>
<td>48 IN OUT N/A N/O</td>
<td>Wiping cloths: properly used and stored</td>
</tr>
<tr>
<td>49 IN OUT N/A N/O</td>
<td>Washing fruits and vegetables</td>
</tr>
</tbody>
</table>

Prevention of Food Contamination

<table>
<thead>
<tr>
<th>Proper Use of Utensils</th>
</tr>
</thead>
<tbody>
<tr>
<td>50 IN OUT N/A N/O</td>
</tr>
<tr>
<td>51 IN OUT N/A</td>
</tr>
<tr>
<td>52 IN OUT N/A</td>
</tr>
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Observations and Corrective Actions

Mark "X" in appropriate box for COS and R: COS = corrected on-site during inspection R = repeat violation

<table>
<thead>
<tr>
<th>Item No.</th>
<th>Code Section</th>
<th>Priority Level</th>
<th>Comment</th>
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<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td>The Board of Health required that your &quot;schedule of improvements&quot;, that you submitted to them in May, be followed. To this point, the first 90 days has passed without meeting the requirements. The second 90 days is nearly up without meeting the requirements. The owner states that there is a possible sale in the next month to two months. At this point, the deadlines from the Board of Health adoption of your &quot;schedule of improvements&quot; will be passed to the new owner. A complete re-check of all improvements will be done during the next quarterly inspection, but the noted items for this inspection included: vinyl sheet flooring was put down over the floor in the bar area and approximately 2'x2' area of the kitchen floor was worked on.</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>The slicer blade and the ice bin are dirty food contact surfaces that can contaminate foods. See Item 16 for details.</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Fried onion rings are a TCS food and have to be maintained in the safe zone to prevent pathogen growth. Also, breading and flour were exposed to roof leak water, which is obvious contamination. See Item 21 for details on both.</td>
</tr>
<tr>
<td>13</td>
<td>3717-1-03</td>
<td>NC</td>
<td>Food - safe, unadulterated, and honestly presented</td>
</tr>
<tr>
<td>13</td>
<td>3717-1-03.3(L)</td>
<td>C</td>
<td>A bag of flour and a bag of breading were wet from the roof leak at the ventilation hood. CORRECTED BY REMOVING TO TRASH.</td>
</tr>
<tr>
<td>16</td>
<td>3717-1-04.5(A)(L)</td>
<td>C</td>
<td>Package integrity - specifications for receiving</td>
</tr>
<tr>
<td>16</td>
<td>3717-1-04.5(A)(L)</td>
<td>C</td>
<td>Cleanliness of equipment food-contact surfaces and utensils. Blade of the slicer has a dried food buildup. Ice machine bin has some mold growing on it.</td>
</tr>
</tbody>
</table>

Person in Charge

Sanitarian
AARON LONGSWORTH
RS/SIT# 3034

Licensor:
Auglaize County Health Department

Date
10/24/2019

PRIORITY LEVEL: C= CRITICAL NC = NON-CRITICAL
## Observations and Corrective Actions (continued)

Mark "X" in appropriate box for COS and R:  
- **COS** = corrected on-site during inspection  
- **R** = repeat violation

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| 21       | 3717-1-03.4(F)(1)(a) | C              | Time/temperature controlled for safety food - hot holding.  
Fried onion rings were being stored at room temperature from the day before, with intention to use on salads today. REMOVED TO TRASH TO CORRECT. | ☑  |   |
| 50       | 3717-1-03.2(K)     | NC             | In-use utensils - between-use storage.  
Ice scoop was stored on ice bin in basement, where isn't protected from dirt. |    |   |
| 51       | 3717-1-04.8(E)(1)  | NC             | Equipment, utensils, linens - storage.  
Clean glasses were stored on a dusty surface at bar.  
3 stacks of Cambro boxes were stored on the floor in the hall. |    |   |
| 54       | 3717-1-04.3(B)     | NC             | Fixed equipment installation - spacing or sealing.  
Food prep sink is not sealed to the wall. |    |   |
| 54       | 3717-1-04.4(A)(1)  | NC             | Equipment - good repair and proper adjustment.  
2 glass door cooler has condensation water leaking into the interior. |    |   |
| 62       | 3717-1-06.4(A)     | NC             | Repairing.  
The roof is leaking in 2 places at the ventilation hood. |    |   |
| 62       | 3717-1-06.4(B)     | NC             | Cleaning - frequency and restrictions.  
Ceiling and wall at dish sink were dirty. |    |   |