State of Ohio

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

Name of facility				ne		License Number	Date						
Red Fein Gifts & Essentials LLC OBA The Diner)	□ RFE	547	10/14/2020						
Address					City/State/Zip Code								
25913 New Guilford Rd					Bladeschure DH 4300K								
				Ц <u>Д</u> on	Time -	Travel Time	C-4/D						
				£ 2.00	,	1 aver time	Category/Descriptive						
r kerel UDAY						(V)	(4)						
Type of Inspection (check all that apply)						Follow up date (if required)							
☑ Standard ☑ Critical Control Point (FSO) □ Process Review (RFE) □ Variar □ Foodborne □ 30 Day □ Complaint □ Pre-licensing □ Consultation					☐ Follow up	Novel entitions It purposes where it is taking	(if required)						
-		2 company 2 to horizing 2 conduction					TEX 11 HIVINIVICI						
433		FOODBORNE ILLNESS RISK FACTO	RS AND	P	PUBLIC HE	ALTH 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					Compliance Status								
411		Supervision		Time/Temperature Controlled for Safety Food (TCS food)									
4	□IN □OUT □ N/A	Person in charge present, demonstrates knowledge, at	nd a		☑ IN □ OUT								
1	ZIN LIOUT LI N/A	performs duties	2:		□N/A □ N/O	Proper date marking and o	disposition						
2	ØÍN □OUT □ N/A	Certified Food Protection Manager	24			Time as a public health con	atrol: procedures & records						
22344		Employee Health	333333		DINIA N/O								
3	MIN DOUT NA	Management, food employees and conditional employee knowledge, responsibilities and reporting	s;	Τ.		Consumer Adviso	ry						
4	ØIN DOUT D N/A	Proper use of restriction and exclusion	25		ZÎN □OUT ⊒N/A	Consumer advisory provid	ed for raw or undercooked foods						
5	DIN DOUT D N/A	Procedures for responding to vomiting and diarrheal ever	nts			Highly Susceptible Pop	oulations						
		Good Hygienic Practices		7 (□ IN □ OUT								
6	ZIN □ OUT □ N/O	Proper eating, tasting, drinking, or tobacco use	26	3 /	⊠N/A	Pasteurized foods used; p	rohibited foods not offered						
7	□/IN □ OUT □ N/O	No discharge from eyes, nose, and mouth	14			Chemical							
131	Pı	Preventing Contamination by Hands UT □ N/O Hands clean and properly washed			□ IN/ □ OUT □N/A	Food additives: approved and properly used							
8	☑N □ OUT □ N/O			<u>'</u> J		. 113 addition. approved and properly used							
	☑IN □ OUT □N/A □ N/O	No bare hand contact with ready-to-eat foods or approvalternate method properly followed	d 28		☑ÍN □ OUT	Toxic substances properly identified, stored, used							
9			ed 2	ا ا	□N/A	sabatanasa property identined, stored, daca							
		· ·				Conformance with Approved	l Procedures						
10	☑ÍN □OUT □ N/A	Adequate handwashing facilities supplied & accessible	29	CI .		Compliance with Reduced							
11	.□N □ OUT	Approved Source Food obtained from approved source		+~	☑Ñ/A	specialized processes, and	HACCP plan						
11	□IN □ØUT		<u> </u>		□ IN □ OUT ☑N/A □ N/O	Special Requirements: Fres	sh Juice Production						
12	□N/A □ N/O	Food received at proper temperature		+	□.IN □ OUT								
13	,ďIN □OUT	Food in good condition, safe, and unadulterated	3		ØN/A □ N/O	Special Requirements: Hea	at Treatment Dispensing Freezers						
14	DIN DOUT	Required records available: shellstock tags, parasite	32		□ JN □ OUT	Special Requirements: Cus	tom Processing						
de la	,ÉN/A □ N/O	destruction		لا	ØÑ/A □ N/O								
4/30	DÍN DOUT	Protection from Contamination	33	3 [□ IN □ OUT ÉN/A □ N/O	Special Requirements: Bulk	Water Machine Criteria						
15	□ ÎN □ OUT □N/A □ N/O	Food separated and protected		1			AMACA						
40	ZIN OUT		34		DIN DOUT		dified White Rice Preparation						
16	□N/A □ N/O	Food-contact surfaces: cleaned and sanitized		and "	DÎÑ/A □ N/O	Criteria							
17	DIN OUT	Proper disposition of returned, previously served, reconditioned, and unsafe food	35		⊒∕ÍN □ OUT □N/A	Critical Control Point Inspec	ction						
	Time/Tempe	rature Controlled for Safety Food (TCS food)		+			With the state of						
	□IN □_OUT		36	ן וּ	⊒Ñ/A	Process Review							
18	□N/A ☑ N/O	Proper cooking time and temperatures		T,	DUT NI								
40	□IN □ OUT	Proper reheating procedures for hot holding	37		□N/A	Variance							
19	□N/A Ø N/O												
20	□ IN □ OUT	Proper cooling time and temperatures		Risk factors are food preparation practices and employee behaviors that are identified as the most significant contributing factors to foodborne illness. Public health interventions are control measures to prevent foodborne									
	□N/A □ N/O	(Leviewer)											
21	ZIN DOUT	Proper hot holding temperatures											
	^e □N/A □ N/O	,	Р										
22	ØÍN □ OUT □N/A	Proper cold holding temperatures	H 1		ess or injury.								
	_ = ::: =::	,	1 1										

HEA 5302A Ohio Department of Health (10/19) AGR 1268 Ohio Department of Agriculture (10/19)

State of Ohio

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Type of Inspection

Date

Rec	1 Fern Gitts & Esse	intials LLC DBH The Diner		Dto	andord [CCP 10 14/6	ara	0						
GOOD RETAIL PRACTICES													
Good Retail Practices are preventative measures to control the introduction of pathogens, chemicals, and physical objects into foods.													
Ma		status (IN, OUT, N/O, N/A) for each numbered item: IN	l =in c			applica	ble						
	/	Safe Food and Water			tensils, Equipment and Vending Food and nonfood-contact surfaces cleanab	ole, pro	perly						
38	☐ IN ☐ OUT ☐N/A ☐ N/O		54	IN OUT	designed, constructed, and used	, р							
39 ☑ IN ☐ OUT ☐ N/A Water and ice from approved source			55	IN OUT ON/A	Warewashing facilities: installed, maintained, strips	used;	test						
	/	od Temperature Control		IN OUT	Nonfood-contact surfaces clean								
40	□ IN □ OUT □N/A/□ N/O	Proper cooling methods used; adequate equipment for temperature control () () ()	Physical Facilities										
41		Plant food properly cooked for hot holding	57	57 IN OUT NA Hot and cold water available; adequate pressure									
42	☑ IN ☐ OUT ☐N/A ☐ N/O	Approved thawing methods used	58	B IN DOUT	Plumbing installed; proper backflow devices	S							
43 IN I OUT IN/A		Thermometers provided and accurate		□N/A □ N/O									
	,	Food Identification	59	IN OUT ON/A									
44	☑ IN ☐ OUT	Food properly labeled; original container	60	60 IN OUT N/A Toilet facilities: properly constructed, supplie									
	Preven	tion of Food Contamination	61	IN OUT ON/A	Garbage/refuse properly disposed; facilities ma	aintaine	d						
45	☑ IN ☐ OUT	Insects, rodents, and animals not present/outer openings protected		2 □ IN □ OUT	Physical facilities installed, maintained, and cle outdoor dining areas		gs in						
46 .	OIN_OUT	Contamination prevented during food preparation, storage & display		□N/A □ N/O	odiacol diffing diodo		12						
47	□ IN □ OUT □N/A	Personal cleanliness	63	IN OUT	Adequate ventilation and lighting; designated a	areas u	sed						
48	☐ IN ☐ OUT ☐N/A ☐ N/O Wiping cloths: properly used and stored		64	IN OUT ON/A	Existing Equipment and Facilities								
49	□ IN □ OUT □N/A/□ N/O	Washing fruits and vegetables			Administrative								
50	IN OUT ON/A ON/O	Proper Use of Utensils	65	IN OUT N/A	901:3-4 OAC								
	Ultanaila, aquinment and linene; preperly stered, dried			/									
51_	handled		66	1	3701-21 OAC								
52	☐ IN ☐ OUT ☐N/A ☐ IN ☐ OUT ☐N/A ☐ N/O	Single-use/single-service articles: properly stored, used Slash-resistant, cloth, and latex glove use	X	perator already	Vecloted health policy								
		Observations and C	orre	ective Actions	MISTIL PINCE								
Itom	n No. Code Section Prior	Mark "X" in appropriate box for COS and R: COS=corrity Level Comment	ected	on-site during inspection	n R=repeat violation								
itei	II NO. Code Section Prior	Previous violations have b	2008	· corrected:	Ventilation Hard	cos	R						
		being prainteined (Aug			A A								
		- Local fire inspection	- 1 -	1 / / / /	for the new of amorshill								
		poerester will nick Contra	7	with tive do	ils (winge of auriership								
		= Prot lock is reported to	reactions!	Continue in hall say									
	Strong dosit awaiiting readir.												
	MO Company (desirives)												
	VI) Operator identified a retential usua with a real contr												
	and removed all first prior to ingo this with												
	The Host of Cold holding was acceptable at time of												
	ingration, Survey over 1437 Hom 387 Whill												
	Milk 4194 (Counter top Cooler)												
		- Fliningte Unusedlin	7171	esperie o	an innered from the								
	Kitchen. A												
- Provide specifications to health deat for any new emigment.													
Person in Charge Date:													
0-	nitarian (1)	grow w		Linanger	TITIOUS								
Sar	My Marc	MA		Licensor:	x Public Health								
PR	IORITY LEVEL: C = CRITI	CAL NC = NON-CRITICAL		•	Page of 2	_							

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