

Type: Full
Date: 10/22/24
Time: 12:00:00
Report: 8010241172

Food and Beverage Establishment Inspection Report

Page 1

Location:

Lincoln Middle School
3301 West 3rd Street
Duluth, MN55807
St. Louis County, 69

Establishment Info:

ID #: 0027042
Risk: High
Announced Inspection: No

License Categories:

FAIF, FBLB, HOSP, FBSC, FBSW, FBC2

Expires on: 12/31/24

Operator:

Duluth Public Schools ISD #709

Phone #: 2183368700
ID #: 35970

The violations listed in this report include any previously issued orders and deficiencies identified during this inspection. Compliance dates are shown for each item.

No NEW orders were issued during this inspection.

Surface and Equipment Sanitizers

Chlorine: = 200 PPM at Degrees Fahrenheit
Location: WIPING CLOTH BUCKET
Violation Issued: No

Hot Water: = at Degrees Fahrenheit
Location: DISHWASHER SANITIZING CYCLE-TEMP TAPE TURNED BLACK
Violation Issued: No

Food and Equipment Temperatures

Process/Item: Hot Holding
Temperature: 211 Degrees Fahrenheit - Location: CHEESE PIZZA-OVEN
Violation Issued: No

Process/Item: Hot Holding
Temperature: 159 Degrees Fahrenheit - Location: PEPPERONI PIZZA-HOT HOLDING UNIT
Violation Issued: No

Process/Item: Upright Cooler
Temperature: 39 Degrees Fahrenheit - Location: SLICED CHEESE-VICTORY
Violation Issued: No

Process/Item: Upright Cooler
Temperature: 34 Degrees Fahrenheit - Location: SLICED JALAPENO PEPPERS-VICTORY
Violation Issued: No

Process/Item: Upright Cooler
Temperature: 38 Degrees Fahrenheit - Location: MILK-MILK COOLER
Violation Issued: No

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Process/Item: Upright Cooler
Temperature: 39 Degrees Fahrenheit - Location: MILK-MILK COOLER
Violation Issued: No

Process/Item: Upright Cooler
Temperature: 39 Degrees Fahrenheit - Location: SLICED HAM SANDWICH-DELI COOLER
Violation Issued: No

Process/Item: Hot Holding
Temperature: 164 Degrees Fahrenheit - Location: FRENCH TOAST-HOT HOLDING UNIT
Violation Issued: No

Process/Item: Hot Holding
Temperature: 147 Degrees Fahrenheit - Location: FOLDED EGGS-HOT HOLDING UNIT
Violation Issued: No

Process/Item: Walk-In Cooler
Temperature: 39 Degrees Fahrenheit - Location: MILK
Violation Issued: No

Process/Item: Walk-In Cooler
Temperature: 38 Degrees Fahrenheit - Location: PREPACKAGED LETTUCE
Violation Issued: No

Process/Item: Walk-In Freezer
Temperature: Degrees Fahrenheit - Location: FOODS FROZEN
Violation Issued: No

| Total Orders | In This Report | Priority 1 | Priority 2 | Priority 3 |
|--------------|----------------|------------|------------|------------|
| | | 0 | 0 | 0 |

COMMENTS:

DISCUSSED THE EXCLUSION OF EMPLOYEES ILL WITH VOMITING OR DIARRHEA FROM THE FOOD ESTABLISHMENT FOR 24 HOURS AFTER SYMPTOMS ARE GONE.

NOTE: Plans and specifications must be submitted for review and approval prior to new construction, remodeling or alterations.

I acknowledge receipt of the Minnesota Department of Health inspection report number 8010241172 of 10/22/24.

Certified Food Protection Manager Susan K. Geissler

Certification Number: 24493 Expires: 02/28/27

Inspection report reviewed with person in charge and emailed.

Signed: _____
Susan Geissler
Kitchen Manager

Signed: Daniel R. Kocinski
8010

651-201-4500
health.foodlodging@state.mn.us

Report #: 8010241172

Food Establishment Inspection Report



Minnesota Department of Health
Minnesota Department of Health
PO Box 64975
St. Paul, MN 55164-0975

No. of RF/PHI Categories Out

0

Date 10/22/24

No. of Repeat RF/PHI Categories Out

0

Time In 12:00:00

Legal Authority MN Rules Chapter 4626

Time Out

Lincoln Middle School

Address

3301 West 3rd Street

City/State

Duluth, MN

Zip Code

55807

Telephone

2183368700

License/Permit #
0027042

Permit Holder

Duluth Public Schools ISD #709

Purpose of Inspection

Full

Est Type

Risk Category

H

FOODBORNE ILLNESS RISK FACTORS AND PUBLIC HEALTH INTERVENTIONS

Circle designated compliance status (IN, OUT, N/O, N/A) for each numbered item

Mark "X" in appropriate box for COS and/or R

IN= in compliance

OUT= not in compliance

N/O= not observed

N/A= not applicable

COS= corrected on-site during inspection

R= repeat violation

| Compliance Status | | COS | R |
|--|----------------|-----|---|
| Supervision | | | |
| 1 | IN OUT | | |
| 2 | IN OUT N/A | | |
| Employee Health | | | |
| 3 | IN OUT | | |
| 4 | IN OUT | | |
| 5 | IN OUT | | |
| Good Hygienic Practices | | | |
| 6 | IN OUT N/O | | |
| 7 | IN OUT N/O | | |
| Preventing Contamination by Hands | | | |
| 8 | IN OUT N/O | | |
| 9 | IN OUT N/A N/O | | |
| 10 | IN OUT | | |
| Approved Source | | | |
| 11 | IN OUT | | |
| 12 | IN OUT N/A N/O | | |
| 13 | IN OUT | | |
| 14 | IN OUT N/A N/O | | |
| Protection from Contamination | | | |
| 15 | IN OUT N/A N/O | | |
| 16 | IN OUT N/A | | |
| 17 | IN OUT | | |

| Compliance Status | | COS | R |
|--|----------------|-----|---|
| Time/Temperature Control for Safety | | | |
| 18 | IN OUT N/A N/O | | |
| 19 | IN OUT N/A N/O | | |
| 20 | IN OUT N/A N/O | | |
| 21 | IN OUT N/A N/O | | |
| 22 | IN OUT N/A | | |
| 23 | IN OUT N/A N/O | | |
| 24 | IN OUT N/A N/O | | |
| Consumer Advisory | | | |
| 25 | IN OUT N/A | | |
| Highly Susceptible Populations | | | |
| 26 | IN OUT N/A | | |
| Food and Color Additives and Toxic Substances | | | |
| 27 | IN OUT N/A | | |
| 28 | IN OUT | | |
| Conformance with Approved Procedures | | | |
| 29 | IN OUT N/A | | |

Risk factors (RF) are improper practices or procedures identified as the most prevalent contributing factors of foodborne illness or injury. **Public Health Interventions (PHI)** are control measures to prevent foodborne illness or injury.

GOOD RETAIL PRACTICES

Good Retail Practices are preventative measures to control the addition of pathogens, chemicals, and physical objects into foods.

Mark "X" in box if numbered item is **not** in compliance

Mark "X" in appropriate box for COS and/or R

COS= corrected on-site during inspection

R= repeat violation

| Compliance Status | | COS | R |
|---|----------------|-----|---|
| Safe Food and Water | | | |
| 30 | IN OUT N/A | | |
| 31 | | | |
| 32 | IN OUT N/A | | |
| Food Temperature Control | | | |
| 33 | | | |
| 34 | IN OUT N/A N/O | | |
| 35 | IN OUT N/A N/O | | |
| 36 | | | |
| Food Identification | | | |
| 37 | | | |
| Prevention of Food Contamination | | | |
| 38 | | | |
| 39 | | | |
| 40 | | | |
| 41 | | | |
| 42 | | | |

| Compliance Status | | COS | R |
|--------------------------------------|--|-----|---|
| Proper Use of Utensils | | | |
| 43 | | | |
| 44 | | | |
| 45 | | | |
| 46 | | | |
| Utensil Equipment and Vending | | | |
| 47 | | | |
| 48 | | | |
| 49 | | | |
| Physical Facilities | | | |
| 50 | | | |
| 51 | | | |
| 52 | | | |
| 53 | | | |
| 54 | | | |
| 55 | | | |
| 56 | | | |
| 57 | | | |
| 58 | | | |

Food Recalls:

Person in Charge (Signature)

Date: 10/22/24

Inspector (Signature)

Diana R. Kowalski