

 RETAIL FOOD ESTABLISHMENT INSPECTION REPORT State Form 57480 (R2 / 4-25) INDIANA DEPARTMENT OF HEALTH FOOD PROTECTION DIVISION		Release Date 9/01/2025		Date 8/21/25	
		No. of Risk Factor/Intervention Violations 0		Time In 11:15AM	
		No. of Repeat Risk Factor/Intervention Violations 0		Time Out	
Establishment Sprunka Elementary		Address 3611 E. Sprunka		City/State Nineveh IN	
Zip Code 46164		Telephone 812-988-6625			
License/Permit # N/A		Permit Holder Compass Group		Purpose of Inspection Routine	
Est. Type School		Risk Category 3			

FOODBORNE ILLNESS RISK FACTORS AND PUBLIC HEALTH INTERVENTIONS					
Circle 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					
Mark "X" in appropriate box for COS and/or R COS=corrected on-site during inspection R=repeat violation					
Compliance Status				COS	R
Supervision					
1	IN OUT N/A N/O	Person in charge present, demonstrates knowledge, and performs duties			
2	IN OUT N/A N/O	Certified Food Protection Manager			
Employee Health					
3	IN OUT N/A N/O	Management, food employee and conditional employee; knowledge, responsibilities and reporting			
4	IN OUT N/A N/O	Proper use of restriction and exclusion			
5	IN OUT N/A N/O	Procedures for responding to vomiting and diarrheal events			
Good Hygienic Practices					
6	IN OUT N/A N/O	Proper eating, tasting, drinking, or tobacco products use			
7	IN OUT N/A N/O	No discharge from eyes, nose, and mouth			
Preventing Contamination by Hands					
8	IN OUT N/A N/O	Hands clean & properly washed			
9	IN OUT N/A N/O	No bare hand contact with RTE food or a pre-approved alternative procedure properly allowed			
10	IN OUT N/A N/O	Adequate handwashing sinks properly supplied and accessible			
Approved Source					
11	IN OUT N/A N/O	Food obtained from approved source			
12	IN OUT N/A N/O	Food received at proper temperature			
13	IN OUT N/A N/O	Food in good condition, safe, & unadulterated			
14	IN OUT N/A N/O	Required records available: molluscan shellfish identification, parasite destruction			
Protection from Contamination					
15	IN OUT N/A N/O	Food separated and protected			
16	IN OUT N/A N/O	Food-contact surfaces; cleaned & sanitized			

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		Pasteurized eggs used where required			
31		Water & ice from approved source			
32		Variance obtained for specialized processing methods			
Food Temperature Control					
33		Proper cooling methods used; adequate equipment for temperature control			
34		Plant food properly cooked for hot holding			
35		Approved thawing methods used			
36		Thermometers provided & accurate			
Food Identification					
37		Food properly labeled; original container			
Prevention of Food Contamination					
38		Insects, rodents, & animals not present			
39		Contamination prevented during food preparation, storage & display			
40		Personal cleanliness			
41		Wiping cloths: properly used & stored			
42		Washing fruits & vegetables			

Compliance Status					
				COS	R
Proper Use of Utensils					
43		In-use utensils: properly stored			
44		Utensils, equipment & linens: properly stored, dried, & handled			
45		Single-use/single-service articles: properly stored & used			
46		Gloves used properly			
Utensils, Equipment and Vending					
47		Food & non-food contact surfaces cleanable, properly designed, constructed, & used			
48		Warewashing facilities: installed, maintained, & used; test strips			
49		Non-food contact surfaces clean			
Physical Facilities					
50		Hot & cold water available; adequate pressure			
51		Plumbing installed; proper backflow devices			
52		Sewage & wastewater properly disposed			
53		Toilet facilities: properly constructed, supplied, & cleaned			
54		Garbage & refuse properly disposed; facilities maintained			
55		Physical facilities installed, maintained, & clean			
56		Adequate ventilation & lighting; designated areas used			

Person In Charge (Signature) Rebecca Montgomery X Rebecca Montgomery		Date: 8/21/25
Inspector (Signature) [Signature]		Follow-up: YES NO (Circle one) Follow-up Date:



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State Form 57480 (R2 / 4-25)
INDIANA DEPARTMENT OF HEALTH
FOOD PROTECTION DIVISION

N/A
License/Permit #

Date

8/21/25

Establishment

Address

City/State

Zip Code

Telephone

Spruick School

3611 E Spruick Rd

Nineveh IN

46164

812-988-6625

OBSERVATIONS AND CORRECTIVE ACTIONS

Item Number

Based on an inspection this day, the item(s) noted below identify violations of 410 IAC 7-26, Indiana Retail Food Establishment Sanitation Requirements. Violations cited in this report must be corrected within the time frames below or as stated in Section 475 and 476 of the Indiana Retail Food Establishment Food Code.

Complete by Date:

No violations observed at time of inspection

Published Comment

Person In Charge (Signature)

Rebecca H. [Signature]

Date: 8/21/25

Inspector (Signature)

[Signature]

Date: 8/21/25

