



Wisconsin Department of Agriculture, Trade and Consumer Protection  
 Division of Food and Recreational Safety  
 PO Box 8911 Madison, WI 53708-8911  
 Phone: (608) 224-4682 Fax: (608) 224-4710

Wis. Stat. § 97.67  
 Subch. IV Wis. Admin. Code  
 ch. ATCP 78

## RECREATIONAL EDUCATIONAL CAMP INSPECTION REPORT

<b>ESTABLISHMENT NAME</b> CAMP JUNIPER KNOLL		<b>LICENSE TYPE</b> Recreational/Educational Camp - Complex	<b>LICENSE NUMBER</b> ATCP-014140
		<b>LICENSEE</b> GIRL SCOUTS OF GREATER CHICAGO & NORTH WEST INDIANA ATCP - L24058	
<b>ESTABLISHMENT PHONE</b> 262 642-5455	<b>ESTABLISHMENT EMAIL</b> pbrothers@girlscoutscnwi.com	<b>LICENSEE ADDRESS</b> 20 S CLARK STE 200 CHICAGO, IL 60603	
<b>INSPECTION DATE</b> 4/17/2024	<b>INSPECTION TYPE</b> Pre-Inspection	<b>FOLLOW-UP REQUIRED - TYPE</b> YES Pre-Inspection Follow-Up	<b>FOLLOW-UP DATE</b> 05/20/2024

### COMMENTS

Please email Camper Sexual Abuse attendees and training dates as well as EMS letter. Take pictures of smoke detector once they are installed.

### OBSERVED VIOLATIONS

For detailed code language regarding violations, go to:

[ATCP 78 - Recreational and Educational Camps, WI Food Code](#) and [ATCP 75 Retail Food Establishments](#).

#### **CRITICAL VIOLATION**

**Correct By** :05/20/2024

Priority - Critical

**Violation Type:** Violation

**Observation:** There are no smoke detectors in platform tents, yurts and new cabins.

**Corrective Action:** Provide operational smoke detectors within manufacturer's lifespan in all sleeping rooms and required locations.

**Code Citation:** *ATCP 78.24 (8) (d) Smoke Detection* - Fire Prevention; notification, extinguisher, alarms, CO

**Correct By** :05/20/2024

Priority Foundation

**Violation Type:** Violation

**Observation:** No camper sexual abuse prevention training curriculum was available.

**Corrective Action:** Maintain documentation of curriculum for required annual camper sexual abuse prevention training.

**Code Citation:** *ATCP 78.26 (5) (c) (1.) Curriculum* - Camper Sexual Abuse Prevention Training

**CRITICAL VIOLATION**

**Correct By :** 05/20/2024

Priority - Critical

**Violation Type:** Violation

**Observation:** The camp operator does not have written arrangements for medical care for campers and camp staff by a staff physician, consulting physician or consulting physician's practice.

**Corrective Action:** Immediately provide written arrangements for medical care for campers and camp staff by a staff physician, consulting physician or consulting physician's practice.

**Code Citation:** *ATCP 78.27 (1)(a) Written Agreement* - Consulting physician; standing orders; camp vehicle

**SUPPLEMENTAL INFORMATION**

Is there are a letter from EMS indicating they can respond within 15 minutes?: No

Initials of IN CAMP holder of first aid and CPR/AED certificate at time of inspection

Course completed for First Aid: MG

Course completed for CPR/AED: MG

Initials of WILDERNESS TRIPS holder of First aid and CPR/AED certificate at time of inspection

Course completed for First Aid: MG

Course completed for CPR/AED: MG

Initials and Course completed for CPR/AED for any additional health staff member(s) IN CAMP

Course completed for CPR/AED: SH

Initials and Course of Lifeguard(s) serving during sessions at time of inspection

Lifeguards's Initials: N/A

Course completed for First Aid: MG

Course completed for CPR/AED: MG

Course completed for Lifeguard: MG

**CERTIFIED FOOD PROTECTION MANAGER**

Name	Certificate Number	Expiration Date
Margaret Gawlik		01/04/2025

**EQUIPMENT TEMPERATURES**

Type	Name	Equipment Temperature
Walk-In Cooler	Norlake	35
Reach-In Freezer	Frigidaire	-3
Reach-In Freezer	Turbo-Air	-5
Chest Freezer	small	

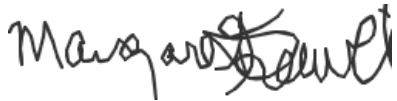
**FOOD TEMPERATURES**

Food Item	Food State	Temperature
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**WAREWASHING INFORMATION**

Machine Name	Sanitization Method	Thermo Label	PPM	Sanitizer Name	Sanitizer Type	Temperature	pH
Hobart	Heat	180					
	3 compartment sink						
	sanitizing bucket						

*Any operator aggrieved by an order of this department under this chapter may request a hearing as provided in Wis. Stat. ch.227t, if state licensed; or a local ordinance, licensed by an agent health department.*



**PERSON IN CHARGE - Margaret Gawlik - Senior Outdoor Property Manager**



**SANITARIAN - Jenifer Barker  
Environmental Health Sanitarian  
jenifer.barker@wisconsin.gov | (608) 622-9068**



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## RECREATIONAL EDUCATIONAL CAMP INSPECTION REPORT

<b>ESTABLISHMENT NAME</b> CAMP JUNIPER KNOLL		<b>LICENSE TYPE</b> Recreational/Educational Camp - Complex	<b>LICENSE NUMBER</b> ATCP-014140
		<b>LICENSEE</b> GIRL SCOUTS OF GREATER CHICAGO & NORTH WEST INDIANA ATCP-L24058	
<b>ESTABLISHMENT PHONE</b> (262) 642 - 5455	<b>ESTABLISHMENT EMAIL</b> pbrothers@girlscoutscnwi.com	<b>LICENSEE ADDRESS</b> 20 S CLARK STE 200 CHICAGO, IL 60603	
<b>INSPECTION DATE</b> 5/30/2024	<b>INSPECTION TYPE</b> Pre-Inspection Follow-Up	<b>FOLLOW-UP REQUIRED - TYPE</b> NO	<b>FOLLOW-UP DATE</b>

### COMMENTS

All critical violations have been corrected. See attached items.  
 Recommend Recreational and Educational Camp License effective 5-30-24

### OBSERVED VIOLATIONS

For detailed code language regarding violations, go to:  
[ATCP 78 - Recreational and Educational Camps](#), [WI Food Code](#) and [ATCP 75 Retail Food Establishments](#).

**SUPPLEMENTAL INFORMATION**

Is there a letter from EMS indicating they can respond within 15 minutes?: Yes

Initials of IN CAMP holder of first aid and CPR/AED certificate at time of inspection

Course completed for First Aid:

Course completed for CPR/AED:

Initials of WILDERNESS TRIPS holder of First aid and CPR/AED certificate at time of inspection

Course completed for First Aid:

Course completed for CPR/AED:

Initials and Course completed for CPR/AED for any additional health staff member(s) IN CAMP

Course completed for CPR/AED:

Initials and Course of Lifeguard(s) serving during sessions at time of inspection

Lifeguards's Initials:

Course completed for First Aid:

Course completed for CPR/AED:

Course completed for Lifeguard:

**CERTIFIED FOOD PROTECTION MANAGER**

Name	Certificate Number	Expiration Date
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**EQUIPMENT TEMPERATURES**

Type	Name	Equipment Temperature
Reach-In Freezer	Turbo-Air	
Walk-In Cooler	Norlake	
Reach-In Freezer	Frigidaire	
Chest Freezer	small	

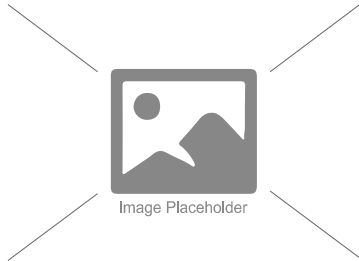
**FOOD TEMPERATURES**

Food Item	Food State	Temperature
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**WAREWASHING INFORMATION**

Machine Name	Sanitization Method	Thermo Label	PPM	Sanitizer Name	Sanitizer Type	Temperature	pH
Hobart	Heat						
	sanitizing bucket						
	3 compartment sink						

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**PERSON IN CHARGE - Margaret Gawlik - Camp Director**

**SANITARIAN - Jenifer Barker**  
**Environmental Health Sanitarian**  
**jenifer.barker@wisconsin.gov | (608) 622-9068**



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## RECREATIONAL EDUCATIONAL CAMP INSPECTION REPORT

<b>ESTABLISHMENT NAME</b> TRINITY WOODS CATHOLIC CAMP & RETREAT CENTER		<b>LICENSE TYPE</b> Recreational/Educational Camp - Moderate with Hospitality	<b>LICENSE NUMBER</b> ATCP-014044
		<b>LICENSEE</b> MN CATHOLIC YOUTH PARTNERSHIP ATCP-L23976	
<b>ESTABLISHMENT PHONE</b> (612) 695 - 0720	<b>ESTABLISHMENT EMAIL</b> timhealy15@gmail.com	<b>LICENSEE ADDRESS</b> 1500 TAMARACK DR LONG LAKE, MN 55356	
<b>INSPECTION DATE</b> 6/6/2024	<b>INSPECTION TYPE</b> Pre-Inspection	<b>FOLLOW-UP REQUIRED - TYPE</b> YES Pre-Inspection Follow-Up	<b>FOLLOW-UP DATE</b> 06/10/2024

### COMMENTS

Campers will not arrive until Monday June 10. several of credentials were obtained but not received along with the third party inspection of the zip line by email. Lifeguard plan and standing orders to be sent by Follow up inspection on 6-10-2024

### OBSERVED VIOLATIONS

For detailed code language regarding violations, go to:

[ATCP 78 - Recreational and Educational Camps](#), [WI Food Code](#) and [ATCP 75 Retail Food Establishments](#).

**Correct By** :06/10/2024

Priority Foundation

**Violation Type:** Violation

**Observation:** Agreement did not include confirmation of background checks for rental group leaders.

**Corrective Action:** Written agreement must include confirmation of rental group leaders background check was completed.

**Code Citation:** *ATCP 78.16 (1) (c) (9.) Background Check - Written Agreement*

**Correct By** :06/06/2024

Priority Foundation

**Violation Type:** Violation

**Observation:** A death, injury, or illness report was not submitted as required for an incident at the facility.

**Corrective Action:** Complete a death, injury, or illness report on the discussed incident immediately to comply with the requirement.

**Code Citation:** *ATCP 78.16 (1) (c) (12.) DII Reporting - Death, Injury, Illness Reporting*

**Correct By** :06/06/2024

Priority Foundation

**Violation Type:** Violation

**Observation:** Window screening on screen door in room 20 of Kateri is ripped open.

**Corrective Action:** Provide 16 mesh wire or other effective screening on all windows that can be opened where campers sleep or provide individual mosquito-type netting.

**Code Citation:** *ATCP 78.21 (1) (d) (1.) and (2.) Effective Screening Options* - Adequate bedding and screening provided

**Correct By** :06/10/2024

Priority Foundation

**Violation Type:** Violation

**Observation:** Challenge course inspection documentation does not include all of the elements inspected. Report has been done but not received. Send report by 6-10-2024

**Corrective Action:** Provide documentation of all elements inspected by the third party inspection vendor.

**Code Citation:** *ATCP 78.26 (3) (b) (2.) (b.) Report Elements Inspected* - Challenge Course inspection

**Correct By** :06/06/2024

Core

**Violation Type:** COS

**Observation:** Employee noted working in food preparation/cooking area without a hair restraint.

**Corrective Action:** Provide employees working in food preparation and cooking areas with effective hair restraint (hat, hair net, beard restraint, etc.). Provided during

**Code Citation:** *2-402.11 - PERSONAL CLEANLINESS - HAIR RESTRAINTS*

**Correct By** :06/10/2024

Priority Foundation

**Violation Type:** Violation

**Observation:** The camp does not have a lifeguard and attendant staffing plan or a copy available for review by the department or its agent.

**Corrective Action:** Create a lifeguard and attendant staffing plan, maintain a copy on the premises and make available to the department or its agent for review.

**Code Citation:** *ATCP 78.26 (3) (c) (2.) Written Plan* - Lifeguard and attendant staffing plan

**Correct By** :06/06/2024

Core

**Violation Type:** Violation

**Observation:** Non-food contact surfaces of cold drawers are soiled with food residue.

**Corrective Action:** Clean and remove dust, dirt, food residue, and other debris from all non-food contact surfaces of equipment.

**Code Citation:** *4-601.11 (C) - NON-FOOD CONTACT SURFACES - CLEAN*

## **CRITICAL VIOLATION**

Priority - Critical

**Violation Type:** Violation

**Observation:** The camp operator does not have written arrangements for medical care for campers and camp staff by a staff physician, consulting physician or consulting physician's practice.

**Corrective Action:** Immediately provide written arrangements for medical care for campers and camp staff by a staff physician, consulting physician or consulting physician's practice.

**Code Citation:** *ATCP 78.27 (1)(a) Written Agreement* - Consulting physician; standing orders; camp vehicle



**SUPPLEMENTAL INFORMATION**

Is there a letter from EMS indicating they can respond within 15 minutes?: No

Initials of IN CAMP holder of first aid and CPR/AED certificate at time of inspection

Course completed for First Aid: T.O. American Heart Association Heart Saver First Aid, AED

Course completed for CPR/AED: T.O. American Heart Association Heart Saver First Aid, AED

Initials of WILDERNESS TRIPS holder of First aid and CPR/AED certificate at time of inspection

Course completed for First Aid:

Course completed for CPR/AED:

Initials and Course completed for CPR/AED for any additional health staff member(s) IN CAMP

Course completed for CPR/AED:

Initials and Course of Lifeguard(s) serving during sessions at time of inspection

Lifeguards's Initials: T.O.

Course completed for First Aid: T.O. American Heart Association Heart Saver First Aid, AED

Course completed for CPR/AED: T.O. American Heart Association Heart Saver First Aid, AED

Course completed for Lifeguard:

**CERTIFIED FOOD PROTECTION MANAGER**

<b>Name</b>	<b>Certificate Number</b>	<b>Expiration Date</b>
Susan johnston		05/07/2029

**EQUIPMENT TEMPERATURES**

<b>Type</b>	<b>Name</b>	<b>Equipment Temperature</b>
Reach-In Cooler	Bev-Aire #2 cooler	38.0 °F
Walk-In Cooler	WIC	35.0 °F
Reach-In Cooler	Bev-Aire #4 cooler	36.0 °F

**FOOD TEMPERATURES**

Food Item	Food State	Temperature
Prime Rib	Cook	200.0 °F
Cream Cheese	Receiving	39.0 °F
Mashed potatoes WIC	Cold Holding	37.0 °F
Milk bev aire 4	Cold Holding	40.0 °F

**WAREWASHING INFORMATION**

Machine Name	Sanitization Method	Thermo Label	PPM	Sanitizer Name	Sanitizer Type	Temperature	pH
B1	manual		300	Ecolab Multiquat	quat		
ADS	High Temp				Hot water		
3 comp sink	manual		200	Ecolab Multiquat	quat		

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**PERSON IN CHARGE - Teresa O'Sullivan - Employee**



**SANITARIAN - Ed Newburry**

**edward.newburry@wisconsin.gov |**



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## RECREATIONAL EDUCATIONAL CAMP INSPECTION REPORT

<b>ESTABLISHMENT NAME</b> BETHEL HORIZONS FOUNDATION		<b>LICENSE TYPE</b> Recreational/Educational Camp - Moderate		<b>LICENSE NUMBER</b> ATCP-010249	
		<b>LICENSEE</b> BETHEL HORIZONS FOUNDATION INC ATCP-L14683			
<b>ESTABLISHMENT PHONE</b> (608) 935 - 5885	<b>ESTABLISHMENT EMAIL</b> ericknueve@bethelhorizons.org	<b>LICENSEE ADDRESS</b> 312 WISCONSIN AVE MADISON, WI 53703			
<b>INSPECTION DATE</b> 6/20/2024	<b>INSPECTION TYPE</b> Routine	<b>FOLLOW-UP REQUIRED - TYPE</b> NO		<b>FOLLOW-UP DATE</b>	

### COMMENTS

Mitchell Sack has completed assessment for rescue inhaler Med Administration; Emergency Epi Auto injectors Admin; oral medication; ear medication; eye medication; topical meds.

Hilary R. Shemak RN, basic med admin prin for Wisconsin Schools; meds administered through Campwise

Upland Hills letter would provide medical services, 5/24/24; response time for EMS to bethel horizons email states response time 3-5 minutes from Dodgeville EMS

Joseph Hansen, MD agrees to be consulting physicians and health care plan and standing orders.

Chief Brian Whitehouse from Dodgeville Fire Department, Iowa Co. Sherriff, and Dodgeville Area Ambulance Service all state that emergency services will respond during camp season.

Emergency Action Plan was reviewed: waterfront, tornado, electrical storms, flooding, fire, accident, serious injury or medical; lost camper  
 Procedures are written for Prairie Center; camp house, farmhouse, barn retreat center, nature center, Scottie Studio, Adamah Studio and retreat center, ropes course octagonal shelter, forest village, on the mountain biking trails,

Jefferson Fire Safety visits yearly, Sprinkler system checked quarterly and full flush yearly.

Phil Bramley, Challenge Course Manager; Bike instructor certification program; adult and Peds first aid/CPR/AED; James Marlow: Project Wet, wild and aquatic wild,

Experimental Systems manual: Annual inspection for ropes course conducted 9/26/23--all facets have passed

Employee handbook have been signed 5/31/24

Evacuation signage have been added to dorms.

An assessment was conducted which resulted in an upgrade to the license complexity from simple to moderate.

## **OBSERVED VIOLATIONS**

For detailed code language regarding violations, go to:

[ATCP 78 - Recreational and Educational Camps](#), [WI Food Code](#) and [ATCP 75 Retail Food Establishments](#).

## **SUPPLEMENTAL INFORMATION**

Is there are a letter from EMS indicating they can respond within 15 minutes?: Yes

### Initials of IN CAMP holder of first aid and CPR/AED certificate at time of inspection

Course completed for First Aid: Yellife Rivera, Nicole Tirif Tejada, Mariana Granados Servantes, Emillo Robles Hernandez, Beatriz Silvana Aguilar Vazquez, Luis Miguel Salinas De Leon, Oscar Mendorz Liano, Jhonatan Soto Patino, Eduardo Oliver Leon, Drew Davisson, Polina Hull, Liliana Sorensen, Sandra Monika Koziel, Jodiale Bailey, Monique Henry, Moises Contreras, Mara Anderson

Course completed for CPR/AED: same

### Initials of WILDERNESS TRIPS holder of First aid and CPR/AED certificate at time of inspection

Course completed for First Aid: Mitchell Sack

Course completed for CPR/AED: Mitchell Sack

### Initials and Course completed for CPR/AED for any additional health staff member(s) IN CAMP

Course completed for CPR/AED: same

### Initials and Course of Lifeguard(s) serving during sessions at time of inspection

Lifeguards's Initials: James Marlow, Jackson Best, Mara Anderson, Mitch Sack

Course completed for First Aid: same

Course completed for CPR/AED: same

Course completed for Lifeguard: same

## **CERTIFIED FOOD PROTECTION MANAGER**

<b>Name</b>	<b>Certificate Number</b>	<b>Expiration Date</b>
Cena Sharp		02/18/2027

## EQUIPMENT TEMPERATURES

Type	Name	Equipment Temperature
Walk-In Cooler	US Cooler (Adamah kitchen)	35.6 °F
Walk-In Freezer	US Cooler (Adamah kitchen)	0.0 °F
Reach-In Cooler	Saturn 2 door (Adamah kitchen)	33.5 °F
Reach-In Cooler	Sub Zero (Adamah kitchen)	36.8 °F
Reach-In Cooler	Superior 2 door (Prairie kitchen)	36.5 °F
Walk-In Cooler	Leer (Prairie kitchen)	38.3 °F
Walk-In Freezer	Leer (Prairie kitchen)	0.0 °F
Reach-In Cooler	Artic Air (Prairie kitchen)	36.4 °F

## FOOD TEMPERATURES

Food Item	Food State	Temperature
chicken (WIC)	Cold Holding	37.6 °F
sour cream (Saturn)	Cold Holding	38.7 °F
milk (Sub Zero)	Cold Holding	36.5 °F
butter (Superior)	Cold Holding	38.9 °F
pork (WIC)	Cold Holding	38.5 °F
OJ (AA)	Cold Holding	37.6 °F
tomato soup	Cook	169.9 °F
ham and cheese sandwich	Re-heating	168.7 °F

## WAREWASHING INFORMATION

Machine Name	Sanitization Method	Thermo Label	PPM	Sanitizer Name	Sanitizer Type	Temperature	pH
Jackson (Adamah kitchen)	high temperature	160F/180F			high temperature	180.9 °F	
Hobart (Prairie kitchen)	high temperature	160F/180F			high temperature	181.9 °F	

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**PERSON IN CHARGE - Eric Knueve - Executive Director**



**SANITARIAN - Emily Schneider**

**[emily.schneider@wisconsin.gov](mailto:emily.schneider@wisconsin.gov) |**



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## RECREATIONAL EDUCATIONAL CAMP INSPECTION REPORT

<b>ESTABLISHMENT NAME</b> WISCONSIN BADGER CAMP		<b>LICENSE TYPE</b> Recreational/Educational Camp - Simple		<b>LICENSE NUMBER</b> ATCP-010258	
		<b>LICENSEE</b> WISC BADGER CAMP INC ATCP-L19693			
<b>ESTABLISHMENT PHONE</b> 608 348-9689	<b>ESTABLISHMENT EMAIL</b> wiscbadgercamp@BadgerCamp.org	<b>LICENSEE ADDRESS</b> PO BOX 723 PLATTEVILLE, WI 53818			
<b>INSPECTION DATE</b> 6/24/2024	<b>INSPECTION TYPE</b> Routine	<b>FOLLOW-UP REQUIRED - TYPE</b> NO		<b>FOLLOW-UP DATE</b>	

### COMMENTS

Austin Rist is the certified food manager, his certificate expires 12/2/24.  
 Jeff White is the MD that signs the annual standing orders.  
 Joan Francis RN is the main health staff member.  
 Rachel Rist is the Aquatics director.

### OBSERVED VIOLATIONS

For detailed code language regarding violations, go to:  
[ATCP 78 - Recreational and Educational Camps](#), [WI Food Code](#) and [ATCP 75 Retail Food Establishments](#).

### **CRITICAL VIOLATION**

Priority - Critical

**Violation Type:** COS

**Observation:** Raw shell eggs stored over ready to eat food.

**Corrective Action:** Reorganize food storage so that ready-to-eat foods are stored above raw animal food and raw vegetables. Moved eggs to bottom shelf.

**Code Citation:** 3-302.11 (A) (1) - PACKAGED AND UNPACKAGED FOOD - RAW OVER RTE-FOODS

## CRITICAL VIOLATION

Priority - Critical

**Violation Type:** COS

**Observation:** The chlorine sanitizer spray bottle is not being used according to EPA registered label use instructions and was at 25 PPM.

**Corrective Action:** Provide training to employees on proper use and concentration of sanitizer. Added chlorine to 100 ppm.

**Code Citation:** 4-501.114 (A) - (E) - FOOD CONTACT SURFACES - WAREWASHING EQUIPMENT, CHEMICAL, TEMPERATURE, pH, CONCENTRATION AND HARDNESS

**Violation Type:** Violation

**Observation:** The privies are not maintained in clean. Remove mice nest and droppings.

**Corrective Action:** Remove mice nest and droppings from privies.

**Code Citation:** -

Core

**Violation Type:** Violation

**Observation:** There are holes in the exterior walls of some of the primitive cabins to allow animal entrance

**Corrective Action:** Repair holes in walls.

**Code Citation:** ATCP 78.24 (4) (a) (1.) *Good Repair-Clean Condition* - Interior maintained good repair; lighting; egress

## SUPPLEMENTAL INFORMATION

Is there a letter from EMS indicating they can respond within 15 minutes?: No

Initials of IN CAMP holder of first aid and CPR/AED certificate at time of inspection

Course completed for First Aid: NN

Course completed for CPR/AED: NN,

Initials of WILDERNESS TRIPS holder of First aid and CPR/AED certificate at time of inspection

Course completed for First Aid:

Course completed for CPR/AED:

Initials and Course completed for CPR/AED for any additional health staff member(s) IN CAMP

Course completed for CPR/AED: JF

Initials and Course of Lifeguard(s) serving during sessions at time of inspection

Lifeguards's Initials: RR

Course completed for First Aid: American Red Cross

Course completed for CPR/AED: American Red Cross

Course completed for Lifeguard: American Red Cross



**CERTIFIED FOOD PROTECTION MANAGER**

Name	Certificate Number	Expiration Date
Austin Rist		12/02/2023

**EQUIPMENT TEMPERATURES**

Type	Name	Equipment Temperature
Reach-In Cooler	3 door cooler	37.0 °F
Reach-In Freezer	Chest freezer	0.0 °F
Walk-In Cooler	Walk in cooler	39.0 °F
Walk-In Freezer	Walk in freezer	0.0 °F

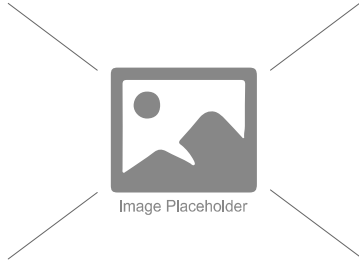
**FOOD TEMPERATURES**

Food Item	Food State	Temperature
Chicken	Cook	169.0 °F
Cheese in walk in cooler	Cold Holding	39.0 °F
Cream cheese in reach in cooler	Cold Holding	38.0 °F

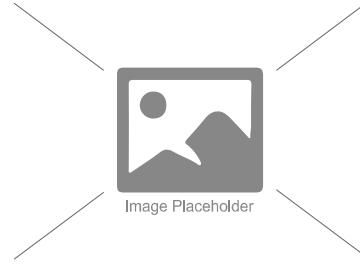
**WAREWASHING INFORMATION**

Machine Name	Sanitization Method	Thermo Label	PPM	Sanitizer Name	Sanitizer Type	Temperature	pH
Dishwasher	Chemical		100	Pro Power	Chlorine		
Spray bottle	Chemical			Bleach	Chlorine		

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**PERSON IN CHARGE - -**



**SANITARIAN - James Udelhoven**

**[james.udelhoven@wisconsin.gov](mailto:james.udelhoven@wisconsin.gov) |**



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 Division of Food and Recreational Safety  
 PO Box 8911 Madison, WI 53708-8911  
 Phone: (608) 224-4682 Fax: (608) 224-4710

Wis. Stat. § 97.67  
 Subch. IV Wis. Admin. Code  
 ch. ATCP 78

## RECREATIONAL EDUCATIONAL CAMP INSPECTION REPORT

<b>ESTABLISHMENT NAME</b>		<b>LICENSE TYPE</b>		<b>LICENSE NUMBER</b>			
CAMP TEKAKWITHA		Recreational/Educational Camp - Simple		ATCP-010259			
		<b>LICENSEE</b>					
		CAMP TEKAWITHA RETREAT & CONFERENCE CENTER INC ATCP-L13922					
<b>ESTABLISHMENT PHONE</b>		<b>ESTABLISHMENT EMAIL</b>		<b>LICENSEE ADDRESS</b>			
715 526-2316		kkupsky@gbdioc.org		W5248 LAKE DR SHAWANO, WI 54166			
<b>INSPECTION DATE</b>		<b>INSPECTION TYPE</b>		<b>FOLLOW-UP REQUIRED - TYPE</b>		<b>FOLLOW-UP DATE</b>	
6/25/2024		Routine		NO			

### COMMENTS

This is a joint inspection with Jenna Ouradnik and Stephanie Sticka.

### OBSERVED VIOLATIONS

For detailed code language regarding violations, go to:

[ATCP 78 - Recreational and Educational Camps](#), [WI Food Code](#) and [ATCP 75 Retail Food Establishments](#).

**Correct By** :08/09/2024

Priority Foundation

**Violation Type:** Violation

**Observation:** Agreement did not address attendant requirements for life guarding in relationship to waterfront activities pursuant to s. ATCP 78.25.

**Corrective Action:** Written agreement must include party responsible for specialized program activities.

**Code Citation:** *ATCP 78.16 (1) (c) (7.) Specialized Program Activity Staffing* - Written Agreement

**Correct By** :07/05/2024

Priority Foundation

**Violation Type:** Violation

**Observation:** Agreement did not include health services documentation requirements.

**Corrective Action:** Written agreement must include responsibility for party documenting medication administration and treatment.

**Code Citation:** *ATCP 78.16 (1) (c) (5.) Health Documentation* - Written Agreement

**Correct By** :07/05/2024

Priority Foundation

**Violation Type:** Violation

**Observation:** Agreement did not include confirmation of sexual abuse prevention training for rental group leaders.

**Corrective Action:** Written agreement must include confirmation of rental group leaders sexual abuse prevention training was completed.

**Code Citation:** *ATCP 78.16 (1) (c) (10.) Sexual Abuse Prevention Training - Written Agreement*

**Correct By** :07/05/2024

Priority Foundation

**Violation Type:** Violation

**Observation:** Agreement did not include confirmation of background checks for rental group leaders.

**Corrective Action:** Written agreement must include confirmation of rental group leaders background check was completed.

**Code Citation:** *ATCP 78.16 (1) (c) (9.) Background Check - Written Agreement*

**Correct By** :07/05/2024

Priority Foundation

**Violation Type:** Violation

**Observation:** A death, injury, or illness report was not submitted as required for an incident at the facility.

**Corrective Action:** Complete a death, injury, or illness report on the discussed incident immediately to comply with the requirement.

**Code Citation:** *ATCP 78.16 (1) (c) (12.) DII Reporting - Death, Injury, Illness Reporting*

**Correct By** :07/05/2024

Core

**Violation Type:** Violation

**Observation:** The following plumbing violations are noted the second sink in the women's restroom in the bathhouse was leaking.

**Corrective Action:** Referral to Department of Safety & Professional Services. \*marking instructions details

**Code Citation:** *ATCP 78.18 (3) (a) Plumbing Maintained - Plumbing system constructed and maintained*

## CRITICAL VIOLATION

Priority - Critical

**Violation Type:** COS

**Observation:** Slushi machine not sanitized after cleaning.

**Corrective Action:** Clean and sanitize all utensils and equipment before contact with food.

**Code Citation:** *4-702.11 - FOOD CONTACT SURFACES - SANITIZED BEFORE USE AFTER CLEANING*

## CRITICAL VIOLATION

Priority - Critical

**Violation Type:** COS

**Observation:** Corn dogs were improperly reheated to 124 degrees before hot hold.

**Corrective Action:** Adjust procedures and methods to properly reheat food. Unsafe food shall be discarded. Corn dogs were reheated during inspection.

**Code Citation:** *3-403.11 - REHEATING FOR HOT HOLDING*

Priority Foundation

**Violation Type:** COS

**Observation:** The bunk configuration had campers on the top bunk and bottom bunk with separation less than six feet apart (head to head instead of head to food).

**Corrective Action:** Provide at least 6 feet horizontally between the heads of campers and ensure 3 feet spacing between the sides of the beds.

**Code Citation:** *ATCP 78.21 (1) (a) (5.) Bunk Bed Layout - Adequate sleeping quarters; capacity*

### CRITICAL VIOLATION

Priority - Critical

**Violation Type:** COS

**Observation:** Carbon monoxide detector in Cabin 8 was not in working order.

**Corrective Action:** Battery was replaced in the carbon monoxide detector during inspection.

**Code Citation:** *ATCP 78.24 (9) (a) Carbon monoxide detection - Fire Prevention; notification, extinguisher, alarms, CO*

**Correct By :** 07/05/2024

Priority Foundation

**Violation Type:** Violation

**Observation:** Background check threshold policy is missing the component to address crimes against nature where children were affected.

**Corrective Action:** Provide a complete background check threshold policy that includes crimes against nature where children were affected.

**Code Citation:** *ATCP 78.26 (1) (c) (1.) (b.) Crimes Against Nature Affected Children - Background Check; frequency, policy*

Priority Foundation

**Violation Type:** COS

**Observation:** The camp does not have a lifeguard and attendant staffing plan or a copy available for review by the department or its agent.

**Corrective Action:** Create a lifeguard and attendant staffing plan, maintain a copy on the premises and make available to the department or its agent for review.

**Code Citation:** *ATCP 78.26 (3) (c) (2.) Written Plan - Lifeguard and attendant staffing plan*

### CRITICAL VIOLATION

**Correct By :** 06/28/2024

Priority - Critical

**Violation Type:** Violation

**Observation:** A direct connection exists between the sewage system and a drain from ice machine.

**Corrective Action:** Design the sewage system in a manner that would preclude a direct connection between the sewage system and the drain from which food is placed. Remove the direct connection.

**Code Citation:** *5-402.11 - SEWAGE - BACKFLOW PREVENTION*

**Correct By :** 07/25/2024

Core

**Violation Type:** Violation

**Observation:** The walls and floor where the ice cream freezer is in the Trading Post are not smooth and easily cleanable. The floor in the porch room where the slushie machine is located is not smooth and easily cleanable.

**Corrective Action:** Provide floors, walls, and ceilings that are designed, constructed, and installed so they are smooth and easily cleanable.

**Code Citation:** *6-201.11 - FLOORS, WALLS AND CEILINGS - CLEANABILITY*

**CRITICAL VIOLATION**

**Correct By :** 07/05/2024

Priority - Critical

**Violation Type:** Violation

**Observation:** Playground equipment has sharp edges or points on the edges of the plastic tubes.

**Corrective Action:** Verify that all sharp points or edges on playground equipment are removed or otherwise protected to prevent camper injury.

**Code Citation:** *ATCP 78.30 (2) (b) (3.) Sharp Points or Edges - Playground Equipment*

**SUPPLEMENTAL INFORMATION**

Is there are a letter from EMS indicating they can respond within 15 minutes?: Yes

Initials of IN CAMP holder of first aid and CPR/AED certificate at time of inspection

Course completed for First Aid: MR

Course completed for CPR/AED: SK

Initials of WILDERNESS TRIPS holder of First aid and CPR/AED certificate at time of inspection

Course completed for First Aid: AW

Course completed for CPR/AED: Wilderness First Aid Survival Med

Initials and Course completed for CPR/AED for any additional health staff member(s) IN CAMP

Course completed for CPR/AED: AW

Initials and Course of Lifeguard(s) serving during sessions at time of inspection

Lifeguards's Initials: OR

Course completed for First Aid: Red Cross Lifeguarding with Professional CPR/AED and First Aid

Course completed for CPR/AED: Red Cross see above

Course completed for Lifeguard: Red Cross see above

**CERTIFIED FOOD PROTECTION MANAGER**

Name	Certificate Number	Expiration Date
Carrie Mihalski	20047617	12/02/2025

**EQUIPMENT TEMPERATURES**

Type	Name	Equipment Temperature
Walk-In Freezer	Freezer	0.0 °F
Walk-In Cooler	Cooler	39.0 °F

**FOOD TEMPERATURES**

Food Item	Food State	Temperature
Corn dog	Re-heating	124.0 °F
diced ham in WIC	Cold Holding	40.1 °F
sliced ham in WIC	Cold Holding	40.3 °F
yogurt in WIC	Cold Holding	38.5 °F
Corn dog	Re-heating	189.0 °F

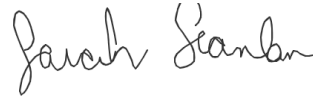
**WAREWASHING INFORMATION**

Machine Name	Sanitization Method	Thermo Label	PPM	Sanitizer Name	Sanitizer Type	Temperature	pH
CMA-180	High Temp	pass					

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**PERSON IN CHARGE - McKenna Runde - Camp Director**



**SANITARIAN - Sarah Scanlan**

**Sarah.Scanlan@wisconsin.gov |**



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## RECREATIONAL EDUCATIONAL CAMP INSPECTION REPORT

<b>ESTABLISHMENT NAME</b> CAMP DANIEL		<b>LICENSE TYPE</b> Recreational/Educational Camp - Simple with Hospitality		<b>LICENSE NUMBER</b> ATCP-011765
		<b>LICENSEE</b> CAMP DANIEL, INC. ATCP-L22019		
<b>ESTABLISHMENT PHONE</b> (715) 757 - 3880	<b>ESTABLISHMENT EMAIL</b> info@campdaniel.org	<b>LICENSEE ADDRESS</b> w 10541 ARMY LN ATHELSTANE, WI 54104		
<b>INSPECTION DATE</b> 6/26/2024	<b>INSPECTION TYPE</b> Routine	<b>FOLLOW-UP REQUIRED - TYPE</b> YES Administrative Follow-up	<b>FOLLOW-UP DATE</b> 07/03/2024	

### COMMENTS

UPDATE 6/27/2024: Report updated to indicate this was a joint inspection between sanitarian's Hischke and Ouradnik. - JLO

\* Please provide verification via text or email once the dishwasher has been repaired and is dispensing the proper amount of sanitizer.

- Viewed safe water sample results dated 5/22/24

- Discussed new rec ed camp requirements - the sanitarians will provide further information regarding the background check availability of minors

### OBSERVED VIOLATIONS

For detailed code language regarding violations, go to:

[ATCP 78 - Recreational and Educational Camps](#), [WI Food Code](#) and [ATCP 75 Retail Food Establishments](#).

### **CRITICAL VIOLATION**

Priority - Critical

**Violation Type:** COS

**Observation:** The ProPower low temperature sanitizer is not being used according to EPA registered label use instructions and is at 0 PPM.  
 CORRECTED: Staff are able to wash dishes by hand in the three compartment sink.

**Corrective Action:** Provide training to employees on proper use and concentration of sanitizer or repair or adjust warewashing equipment to provide proper sanitizer concentration.

**Code Citation:** 4-501.114 (A) - (E) - FOOD CONTACT SURFACES - WAREWASHING EQUIPMENT, CHEMICAL, TEMPERATURE, pH, CONCENTRATION AND HARDNESS



**Correct By** :07/06/2024

Priority Foundation

**Violation Type:** Violation

**Observation:** Staff under the age of 18 living on the premises did not have the required background check.

**Corrective Action:** Provide a means to account for proper camp staff screening including a criminal background check during the hiring process.

**Code Citation:** *ATCP 78.26 (1) (a) Applicable Individuals* - Background Check; frequency, policy

**Correct By** :07/06/2024

Priority Foundation

**Violation Type:** Violation

**Observation:** No written policy is available for addressing the employment selection of camp staff after a background check reveals a record of violent crime against a person or animal, crimes against nature where children were affected, any crime involving a child as a victim, or possession or facilitation of child pornography.

**Corrective Action:** Provide a policy that addresses the employment selection of a person after a background check reveals a record of violent crime against a person or animal, crimes against nature where children were affected, any crime involving a child as a victim, or possession or facilitation of child pornography.

**Code Citation:** *ATCP 78.26 (1) (c) (1.) (a.) Background Check Threshold Policy*- Background Check; frequency, policy

**Correct By** :07/06/2024

Priority Foundation

**Violation Type:** Violation

**Observation:** Thermometer used in food establishment is not accurate to +/- 2 °F.

**Corrective Action:** Calibrate or replace thermometer.

**Code Citation:** *4-203.11 - THERMOMETERS - FOOD - ACCURACY*

Priority Foundation

**Violation Type:** COS

**Observation:** The camp does not have a lifeguard and attendant staffing plan or a copy available for review by the department or its agent. CORRECTED: A lifeguard staffing plan was completed during the inspection.

**Corrective Action:** Create a lifeguard and attendant staffing plan, maintain a copy on the premises and make available to the department or its agent for review.

**Code Citation:** *ATCP 78.26 (3) (c) (2.) Written Plan* - Lifeguard and attendant staffing plan

## CRITICAL VIOLATION

Priority - Critical

**Violation Type:** COS

**Observation:** Personal floatation devices were not available in the rescue boat. CORRECTED: PFD was provided during the inspection.

**Corrective Action:** Provide US Coast Guard approved PFD's in every rescue boat.

**Code Citation:** *ATCP 78.26 (3) (c) (12.) (c.) Rescue Boat PFD* - Rescue boat & PFD available

## SUPPLEMENTAL INFORMATION

Is there a letter from EMS indicating they can respond within 15 minutes?: No

### Initials of IN CAMP holder of first aid and CPR/AED certificate at time of inspection

Course completed for First Aid: JK & KS - WI RN

Course completed for CPR/AED: GR - Am. Heart Assoc. Heartsaver

### Initials of WILDERNESS TRIPS holder of First aid and CPR/AED certificate at time of inspection

Course completed for First Aid: n/a

Course completed for CPR/AED: n/a

### Initials and Course completed for CPR/AED for any additional health staff member(s) IN CAMP

Course completed for CPR/AED: JJ - AM. Heart Assoc.

### Initials and Course of Lifeguard(s) serving during sessions at time of inspection

Lifeguards's Initials: EH

Course completed for First Aid: Red Cross Lifeguard for Professional Rescuer w/ First Aid

Course completed for CPR/AED: Red Cross Lifeguard for Professional Rescuer w/ First Aid

Course completed for Lifeguard: Red Cross Lifeguard for Professional Rescuer w/ First Aid

## CERTIFIED FOOD PROTECTION MANAGER

Name	Certificate Number	Expiration Date
Dylan Stonelake		05/17/2028

## EQUIPMENT TEMPERATURES

Type	Name	Equipment Temperature
Reach-In Freezer	Reach In Freezer - Diner	0.0 °F
Walk-In Freezer	Walk in Freezer	0.0 °F
Walk-In Cooler	Walk In Cooler	36.0 °F
Other	Milk Dispenser	37.0 °F
Chest Freezer	Hard Scoop Ice Cream Freezer - Diner	0.0 °F
Reach-In Cooler	Reach In - Diner	33.0 °F

**FOOD TEMPERATURES**

Food Item	Food State	Temperature
Milk (Diner RIC)	Cold Holding	39.5 °F
Chicken Tenders (WIC)	Cold Holding	38.0 °F
Baked Beans (WIC)	Cold Holding	37.0 °F
CH Pulled Pork (WIC)	Cold Holding	36.0 °F
Milk (dispenser)	Cold Holding	27.0 °F
Juice - Dispenser	Cold Holding	37.0 °F

**WAREWASHING INFORMATION**

Machine Name	Sanitization Method	Thermo Label	PPM	Sanitizer Name	Sanitizer Type	Temperature	pH
3 Compartment Sink	Manual		200	ProPower	Quaternary Ammonium		
Dish Machine	Chemical		0	ProPower Low Temp	Chlorine		

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**PERSON IN CHARGE - Evan Hartwig - Assistant Director**

**SANITARIAN - Jenna Ouradnik**

Jenna.Ouradnik@datcp.wisconsin.gov |



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## RECREATIONAL EDUCATIONAL CAMP INSPECTION REPORT

<b>ESTABLISHMENT NAME</b> CAMP WOODBROOKE		<b>LICENSE TYPE</b> Recreational/Educational Camp - Simple	<b>LICENSE NUMBER</b> ATCP-010253
		<b>LICENSEE</b> CAMP WOODBROOKE INC ATCP-L09356	
<b>ESTABLISHMENT PHONE</b> 608 647-8703	<b>ESTABLISHMENT EMAIL</b> director@campwoodbrooke.org	<b>LICENSEE ADDRESS</b> 1704 ROBERTS CT MADISON, WI 53711	
<b>INSPECTION DATE</b> 6/27/2024	<b>INSPECTION TYPE</b> Routine	<b>FOLLOW-UP REQUIRED - TYPE</b> NO	<b>FOLLOW-UP DATE</b>

### COMMENTS

Scott Glad, Richland Center Fire Chief response time is 15 minutes

Reviewed policy: waterfront safety; emergency for swim time; lighting emergency; missing persons.

Staff will sign staff training handbook next year.

Andrew Wright, consulting physician Richland Center Hospital/Muscoda Health Center, standing orders.

Jill Tikkun; Zoey Richter distribute meds and have the training; Doctor checks in kids; and gives orders to distribute meds.

### OBSERVED VIOLATIONS

For detailed code language regarding violations, go to:

[ATCP 78 - Recreational and Educational Camps](#), [WI Food Code](#) and [ATCP 75 Retail Food Establishments](#).

### **CRITICAL VIOLATION**

**Correct By** :06/27/2024

Priority - Critical

**Violation Type:** COS

**Observation:** Camp health services staff that dispense medication has not met the minimum training for the medication administration principles online modules.

Management has taken the course and sent a confirmation later in the day.

**Corrective Action:** Require all health services staff that dispense medication take the required DPI training for medication administration principles.

**Code Citation:** ATCP 78.27 (2) (b) (4.) Medication Administration Principles - Onsite health services staff requirements met

**Correct By** :07/04/2024

Core

**Violation Type:** Violation

**Observation:** Ceiling has exposed floor joist that are wooden. Seal the wood to be smooth and easily cleanable in the kitchen/processing area.

**Corrective Action:** Provide wall and ceiling coverings that are smooth, easily cleanable and nonabsorbent.

**Code Citation:** 6-201.16 - WALL AND CEILING COVERINGS AND COATINGS

### **SUPPLEMENTAL INFORMATION**

Is there are a letter from EMS indicating they can respond within 15 minutes?: Yes

#### Initials of IN CAMP holder of first aid and CPR/AED certificate at time of inspection

Course completed for First Aid: see attachement

Course completed for CPR/AED: same

#### Initials of WILDERNESS TRIPS holder of First aid and CPR/AED certificate at time of inspection

Course completed for First Aid: same

Course completed for CPR/AED: same

#### Initials and Course completed for CPR/AED for any additional health staff member(s) IN CAMP

Course completed for CPR/AED: same

#### Initials and Course of Lifeguard(s) serving during sessions at time of inspection

Lifeguards's Initials: same

Course completed for First Aid: same

Course completed for CPR/AED: same

Course completed for Lifeguard: same

### **CERTIFIED FOOD PROTECTION MANAGER**

<b>Name</b>	<b>Certificate Number</b>	<b>Expiration Date</b>
Jill Tikkun		11/22/2025

### **EQUIPMENT TEMPERATURES**

<b>Type</b>	<b>Name</b>	<b>Equipment Temperature</b>
Reach-In Cooler	True 3 door	39.9 °F
Reach-In Freezer	Saturn	0.0 °F

**FOOD TEMPERATURES**

Food Item	Food State	Temperature
Beans	Cook	167.8 °F
eggs (True)	Cold Holding	40.6 °F

**WAREWASHING INFORMATION**

Machine Name	Sanitization Method	Thermo Label	PPM	Sanitizer Name	Sanitizer Type	Temperature	pH
Centerline	low tem	120F/120F	100	Keystone	chlorine		
Spray bottle	manual		100	bleach	bleach		

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**PERSON IN CHARGE - Jill Tikun - Director**



**SANITARIAN - Emily Schneider**

**emily.schneider@wisconsin.gov |**



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## RECREATIONAL EDUCATIONAL CAMP INSPECTION REPORT

<b>ESTABLISHMENT NAME</b> CAMP WAWBEEK		<b>LICENSE TYPE</b> Recreational/Educational Camp - Moderate with Hospitality		<b>LICENSE NUMBER</b> ATCP-001498
		<b>LICENSEE</b> EASTER SEALS WISCONSIN CAMP WAWBEEK ATCP-L16538		
<b>ESTABLISHMENT PHONE</b> (608) 841 - 1521	<b>ESTABLISHMENT EMAIL</b> apeters@eastersealswisconsin.com	<b>LICENSEE ADDRESS</b> 8001 EXCELSIOR DR SUITE 200 MADISON, WI 53717		
<b>INSPECTION DATE</b> 7/2/2024	<b>INSPECTION TYPE</b> Routine	<b>FOLLOW-UP REQUIRED - TYPE</b> NO	<b>FOLLOW-UP DATE</b>	

### COMMENTS

Routine inspection conducted by Sanitarian Joseph Vue.  
 Water: Negative for bacteria - 04/12/2024.  
 High risk activities include High Ropes Course, Low Ropes Course, Climbing wall, archery.  
 Certification for High Ropes Course: Bridgette McCormick, Practitioner Certification - ABEE - 05/20/2024, expires in one year.  
 Alexander Peters - USA Archery - April 20th, 2023 - expires in two years.  
 High ropes and Climbing tower inspected by ABEE on 04/25/2024.  
 Low Ropes course completed today. Engineering information will be emailed soon as possible.  
 RN onsite - Amanda Verhagen, 1102569-30 - expiration: 03/01/2026.  
 National Sex offender Check.  
 Reference Services.  
 Complaint inspection was also conducted.  
 Emergency response form for under 15 minutes was not provided. Operator will work on completing the response time.

## OBSERVED VIOLATIONS

For detailed code language regarding violations, go to:

[ATCP 78 - Recreational and Educational Camps](#), [WI Food Code](#) and [ATCP 75 Retail Food Establishments](#).

### **CRITICAL VIOLATION**

**Correct By** :07/05/2024

Priority - Critical

**Violation Type:** Violation

**Observation:** Carbon monoxide detector in basement is absent for fuel burning water heaters in the memorial residence dorm.

**Corrective Action:** Provide operational carbon monoxide detectors within manufacturer's lifespan in all sleeping rooms and required locations with fuel burning appliances.

**Code Citation:** *ATCP 78.24 (9) (a) Carbon monoxide detection* - Fire Prevention; notification, extinguisher, alarms, CO

Core

**Violation Type:** Violation

**Observation:** Wiping cloth solution is not kept at 50-100 ppm for chlorine.

**Corrective Action:** Maintain wiping cloth sanitizer solution clean and free from visible debris and at 100 ppm for chlorine.

**Code Citation:** *3-304.14 (D) - WIPING CLOTHS - USE LIMITATION - SANITIZING SOLUTIONS*

Core

**Violation Type:** Violation

**Observation:** An irreversible registering thermometer is not provided for measuring utensil surface temperatures in the hot water mechanical warewashing operation.

**Corrective Action:** Provide an irreversible registering thermometer.

**Code Citation:** *4-302.13 (B) - WAREWASHING - MECHANICAL HOT WATER - TEMPERATURE MEASURING DEVICES*

Priority Foundation

**Violation Type:** Violation

**Observation:** A chlorine test kit is not available for checking sanitizer concentrations for chlorine sanitizer wiping cloths.

**Corrective Action:** Provide a test kit or other device for measuring the concentration of sanitizing solutions.

**Code Citation:** *4-302.14 - WAREWASHING - SANITIZING SOLUTION - TESTING DEVICES*



**SUPPLEMENTAL INFORMATION**

Is there a letter from EMS indicating they can respond within 15 minutes?: No

Initials of IN CAMP holder of first aid and CPR/AED certificate at time of inspection

Course completed for First Aid: Carlee Fosco - 04/22/2024

Course completed for CPR/AED: Carlee Fosco - 04/22/2024

Initials of WILDERNESS TRIPS holder of First aid and CPR/AED certificate at time of inspection

Course completed for First Aid: N/A

Course completed for CPR/AED: N/A

Initials and Course completed for CPR/AED for any additional health staff member(s) IN CAMP

Course completed for CPR/AED: N/O

Initials and Course of Lifeguard(s) serving during sessions at time of inspection

Lifeguards's Initials: EK

Course completed for First Aid: American Red Cross

Course completed for CPR/AED: American Red Cross

Course completed for Lifeguard: 05/24/2024

**CERTIFIED FOOD PROTECTION MANAGER**

<b>Name</b>	<b>Certificate Number</b>	<b>Expiration Date</b>
Carlee Fosco - Always Food Safe	1889196	12/05/2027

**EQUIPMENT TEMPERATURES**

<b>Type</b>	<b>Name</b>	<b>Equipment Temperature</b>
Walk-In Cooler	Walk in cooler	35.0 °F
Walk-In Freezer	Walk in Freezer	4.0 °F

**FOOD TEMPERATURES**

<b>Food Item</b>	<b>Food State</b>	<b>Temperature</b>
Walk-in Cooler - Cheese	Cold Holding	38.0 °F

**WAREWASHING INFORMATION**

Machine Name	Sanitization Method	Thermo Label	PPM	Sanitizer Name	Sanitizer Type	Temperature	pH
Dish Machine - Hobart	High Temperature					178.0 °F	

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**PERSON IN CHARGE - Alexander Peters - Director**



**SANITARIAN - Joseph Vue**

**joseph.vue@wisconsin.gov | (608) 720-0697**



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 ch. ATCP 78

## RECREATIONAL EDUCATIONAL CAMP INSPECTION REPORT

<b>ESTABLISHMENT NAME</b> IMAGO DEI VILLAGE CAMP		<b>LICENSE TYPE</b> Recreational/Educational Camp - Moderate	<b>LICENSE NUMBER</b> ATCP-010261
		<b>LICENSEE</b> CROSSWAYS LUTH CMP MINISTRIES INC ATCP-L10951	
<b>ESTABLISHMENT PHONE</b> 715 823-2902	<b>ESTABLISHMENT EMAIL</b> jess@crosswayscamps.org	<b>LICENSEE ADDRESS</b> W8160 CLOVERLEAF LAKE CLINTONVILLE, WI 54929	
<b>INSPECTION DATE</b> 7/17/2024	<b>INSPECTION TYPE</b> Routine	<b>FOLLOW-UP REQUIRED - TYPE</b> YES Re-Inspection	<b>FOLLOW-UP DATE</b> 07/22/2024

**\*\*Re-Inspection Required - A Re-Inspection Fee will be applied upon completion of Re-Inspection.\*\***

### COMMENTS

Well samples for both wells performed on 05/20/2024 and were negative for bacteria, non-detect for nitrate.

The climbing wall is not in use for this year due to the belay being noted as a failure on the inspection. The Mohawk walk was noted as a failure due to it not being constructed to standards and the director plans to tear this element down.

Discussed including more detailed information for the isolation plans (for example symptoms that would prompt isolation). Also discussed the section regarding two campers in isolation together with the same communicable disease.

A re-inspection will be required due to the following: 1. The camp operator has no written arrangements for medical care of campers and camp staff by a staff physician or consulting physician, or consulting physician's practice. 2. Medication log listed one medicine as administered twice when it was a once-a-day medication, for the same camper another medication was missing, and for a separate camper the camper's administered medicine does not match the prescription bottle or the directions given by the parent (the parent's directions did not match the prescription bottle).

Re-inspections are chargeable and will incur a fee of \$200.

### OBSERVED VIOLATIONS

For detailed code language regarding violations, go to:

[ATCP 78 - Recreational and Educational Camps](#), [WI Food Code](#) and [ATCP 75 Retail Food Establishments](#).

**Correct By** :07/27/2024

Priority Foundation

**Violation Type:** Violation

**Observation:** Agreement did not include confirmation of background checks for rental group leaders.

**Corrective Action:** Written agreement must include confirmation of rental group leaders background check was completed.

**Code Citation:** *ATCP 78.16 (1) (c) (9.) Background Check - Written Agreement*

**Correct By** :07/27/2024

Priority Foundation

**Violation Type:** Violation

**Observation:** Agreement did not include camp vehicle requirement.

**Corrective Action:** Written agreement must include party responsible for having a camp vehicle available on premises.

**Code Citation:** *ATCP 78.16 (1) (c) (6.) Camp Vehicle - Written Agreement*

**Correct By** :07/27/2024

Priority Foundation

**Violation Type:** Violation

**Observation:** Agreement did not include confirmation of sexual abuse prevention training for rental group leaders.

**Corrective Action:** Written agreement must include confirmation of rental group leaders sexual abuse prevention training was completed.

**Code Citation:** *ATCP 78.16 (1) (c) (10.) Sexual Abuse Prevention Training - Written Agreement*

**Correct By** :07/27/2024

Priority Foundation

**Violation Type:** Violation

**Observation:** Agreement did not include health services documentation requirements.

**Corrective Action:** Written agreement must include responsibility for party documenting medication administration and treatment.

**Code Citation:** *ATCP 78.16 (1) (c) (5.) Health Documentation - Written Agreement*

**Correct By** :07/27/2024

Priority Foundation

**Violation Type:** Violation

**Observation:** A death, injury, or illness report documentation responsibility is not specified in the user agreement.

**Corrective Action:** Complete a death, injury, or illness report on the discussed incident immediately to comply with the requirement.

**Code Citation:** *ATCP 78.16 (1) (c) (12.) DII Reporting - Death, Injury, Illness Reporting*

**Correct By** :08/17/2024

Core

**Violation Type:** Violation

**Observation:** Templates death, injury illness forms, health history forms and medical administration and treatment forms are not available during the inspection.

**Corrective Action:** The camp operator must provide template to ensure the rental group completes proper recordkeeping.

**Code Citation:** *ATCP 78.16 (1) (d) Templates Available - Recordkeeping*

**Correct By** :07/27/2024

Priority Foundation

**Violation Type:** Violation

**Observation:** No date marking system in place for dating items that were made, frozen and then thawed, such as cooked noodles.

**Corrective Action:** Adjust method or procedures so that all ready-to-eat time/temperature control for safety food, if required, are provided with an approved method of date marking. Discard improperly date marked food or food that has past the 7 day shelf life.

**Code Citation:** *3-501.17 (D) - RTE/TCS FOOD - DATE MARKING METHODS*

**Correct By** :07/27/2024

Priority Foundation

**Violation Type:** Violation

**Observation:** Mattresses in the Johnson cabin are absorbent and not easily cleanable and are not provided with a mattress cover that is easily cleanable and nonabsorbent.

**Corrective Action:** Provide a mattress or mattress cover that is easily cleanable and nonabsorbent.

**Code Citation:** *ATCP 78.21 (1) (e) (3.) (a.) Mattress Pad* - Adequate bedding and screening provided

**Correct By** :07/27/2024

Priority Foundation

**Violation Type:** Violation

**Observation:** Guard openings at the waterfront stairs are greater than 4 and 3/8 inches. Guard openings at the welcome center on the side are greater than 4 and 3/8 inches.

**Corrective Action:** Install guard that does not exceed 4 and 3/8 inches to prevent camper entrapment.

**Code Citation:** *ATCP 78.24 (2) (b) (3.) Guard Spacing* - Building code; handrails, guards, and stairs

## CRITICAL VIOLATION

Priority - Critical

**Violation Type:** COS

**Observation:** Splashless bleach was being used for sanitizing dishes and utensils at the warewashing sinks and is not being used according to manufacturer's use directions.

**Corrective Action:** Change procedures and provide training to employees on proper use of poisonous or toxic materials following manufacturer's directions for use. Facility will utilize low temperature chlorine sanitizer moving forward.

**Code Citation:** *7-202.12 (A)* - TOXIC SUBSTANCES - CONDITIONS OF USE - USED

**Correct By** :07/27/2024

Priority Foundation

**Violation Type:** Violation

**Observation:** Working containers of soapy water were not labeled with common name of product.

**Corrective Action:** Label working containers with the common name of the material used.

**Code Citation:** *7-102.11* - TOXIC SUBSTANCES - WORKING CONTAINERS

Priority Foundation

**Violation Type:** COS

**Observation:** Improper cooling methods are observed for biscuit gravy were noted as the gravy was cooled in a plastic container approximately 6 inches thick in the walk-in cooler.

**Corrective Action:** Adjust methods or procedures to facilitate cooling as described in 3-501.15. Gravy was discarded by choice of the Certified Food Protection Manager as the gravy was at 106 degrees at 10:26 after cooling since 8:30.

**Code Citation:** *3-501.15 (A)* - PROPER COOLING METHODS - CRITERIA

**Correct By** :07/27/2024

Priority Foundation

**Violation Type:** Violation

**Observation:** Background check threshold policy is missing the component to address possession or facilitation of child pornography.

**Corrective Action:** Provide a complete background check threshold policy that includes crimes involving the possession or facilitation of child pornography.

**Code Citation:** *ATCP 78.26 (1) (c) (1.) (d.) Child Pornography* - Background Check; frequency, policy

**Correct By** :08/17/2024

Priority Foundation

**Violation Type:** Violation

**Observation:** Employment application form is missing required field disclosing sexual criminal history.

**Corrective Action:** Provide an application form that includes a field for disclosing sexual criminal history.

**Code Citation:** *ATCP 78.26 (1) (a) (1.)(b.) Disclosure of Sexual Criminal History* - Background Check; frequency, policy

**Correct By** :07/27/2024

Priority Foundation

**Violation Type:** Violation

**Observation:** Employment application form is missing required field allowing permission for background check.

**Corrective Action:** Provide an application form that includes a field for permission to conduct a background check.

**Code Citation:** *ATCP 78.26 (1) (a) (1.)(c.) Permission for Background Check* - Background Check; frequency, policy

**Correct By** :07/27/2024

Priority Foundation

**Violation Type:** Violation

**Observation:** The written emergency response plan does not address a camp's response to a foodborne illness outbreak.

**Corrective Action:** Include in the camp emergency response plan provisions for camp response to a communicable disease and foodborne illness outbreak, including reporting and notification to the health department.

**Code Citation:** *ATCP 78.26 (5) (b) (1.) (e.) Communicable Disease Response* - Camp security; emergency written plans

### **CRITICAL VIOLATION**

**Correct By** :07/20/2024

Priority - Critical

**Violation Type:** Violation

**Observation:** The camp operator does not have written arrangements for medical care for campers and camp staff by a staff physician, consulting physician or consulting physician's practice.

**Corrective Action:** Immediately provide written arrangements for medical care for campers and camp staff by a staff physician, consulting physician or consulting physician's practice.

**Code Citation:** *ATCP 78.27 (1)(a) Written Agreement* - Consulting physician; standing orders; camp vehicle

**Correct By** :08/17/2024

Core

**Violation Type:** Violation

**Observation:** No waste receptacle provided at handwashing sink.

**Corrective Action:** Handwashing sinks using single-use paper toweling for hand drying shall be provided with a waste receptacle. Provide a waste receptacle at the handwashing sink.

**Code Citation:** *5-501.16 (C) - GARBAGE/REFUSE - WASTE RECEPTACLE AT HANDWASHNG SINK*

### **CRITICAL VIOLATION**

**Correct By** :08/17/2024

Priority - Critical

**Violation Type:** Violation

**Observation:** Prescription medications brought to camp by a camper or staff member are not in containers that are clearly labeled with camper name.

**Corrective Action:** Verify that all medications that are surrendered by campers to on-site health services staff are clearly labeled to include the name of the camper or staff member.

**Code Citation:** *ATCP 78.27 (4) (a) (1.) (a.) Prescription Medications Labeled* - Medications labeled and kept locked

**Correct By** :07/20/2024

Priority Foundation

**Violation Type:** Violation

**Observation:** The medication log indicated that a camper was given the same medication twice per day when the prescribed medication was to be given once per day. The same camper had an additional medication that was prescribed once per day but was not noted as being given in the medical log.

The medication log also reflected a different camper who was not being given the dosage according to the prescription information on the prescription medication bottle. The parent had provided different medication quantities to be given to the camper, but those were on a written note and did not match the prescription bottle or the medication log.

**Corrective Action:** Verify that health services staff log all medications administered and any treatments provided to campers as soon as possible.

**Code Citation:** *ATCP 78.27 (5) (b) Medication and Treatment Not Logged* - Medication administration

**SUPPLEMENTAL INFORMATION**

Is there are a letter from EMS indicating they can respond within 15 minutes?: No

Initials of IN CAMP holder of first aid and CPR/AED certificate at time of inspection

Course completed for First Aid: AW, NOLS Wilderness First Aid

Course completed for CPR/AED: AW, NOLS Wilderness First Aid, ARC Basic Life Support

Initials of WILDERNESS TRIPS holder of First aid and CPR/AED certificate at time of inspection

Course completed for First Aid: CW, American Red Cross Wilderness and Remote First Aid

Course completed for CPR/AED: CW, American Red Cross Adult and Pediatric First Aid/CPR/AED

Initials and Course completed for CPR/AED for any additional health staff member(s) IN CAMP

Course completed for CPR/AED: GA, American Red Cross Adult CPR/AED, Infant CPR and First Aid

Initials and Course of Lifeguard(s) serving during sessions at time of inspection

Lifeguards's Initials: CW

Course completed for First Aid: American Red Cross Adult/Pediatric First Aid

Course completed for CPR/AED: American Red Cross Adult and Pediatric CPR/AED

Course completed for Lifeguard: American Red Cross Lifeguarding for Professional Rescuers

**CERTIFIED FOOD PROTECTION MANAGER**

Name	Certificate Number	Expiration Date
Brenda Krause	18635234	11/11/2024

**EQUIPMENT TEMPERATURES**

Type	Name	Equipment Temperature
Walk-In Cooler	Walk in cooler	38.0 °F
Walk-In Freezer	Walk in freezer	0.0 °F

**FOOD TEMPERATURES**

Food Item	Food State	Temperature
ham in WIC	Cold Holding	37.0 °F
noodles in walk in cooler	Cold Holding	38.0 °F
biscuit gravy in WIC since 8:30, tempted at 10:26, voluntarily discarded	Cooling	106.0 °F

**WAREWASHING INFORMATION**

Machine Name	Sanitization Method	Thermo Label	PPM	Sanitizer Name	Sanitizer Type	Temperature	pH
Propower	chemical		50	low temp chlorinated sanitizer	chlorine		
3 compartment	chemical		200	Splashless bleach, switched to low temp chlorinated sanitizer	chlorine		

*Your signature on this form acknowledges receipt of the inspection report, and is not an agreement with the findings. Signing this form is voluntary. Personally identifiable information you provide may be used for purposes other than that for which it was collected. Wis Stat 15.04(1)(m). Any operator aggrieved by an order of this department under this chapter may request a hearing as provided in Wis. Stat. ch.227, if state licensed; or a local ordinance, licensed by an agent health department.*




**PERSON IN CHARGE - Amanda Wellens - Engagement and Recruitment Specialist and Summer Site Director**

**SANITARIAN - Sarah Scanlan**

**Sarah.Scanlan@wisconsin.gov |**





Wisconsin Department of Agriculture, Trade and Consumer Protection  
 Division of Food and Recreational Safety  
 PO Box 8911 Madison, WI 53708-8911  
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Wis. Stat. § 97.67  
 Subch. IV Wis. Admin. Code  
 ch. ATCP 78

## RECREATIONAL EDUCATIONAL CAMP INSPECTION REPORT

<b>ESTABLISHMENT NAME</b> CAMP ZION		<b>LICENSE TYPE</b> Recreational/Educational Camp - Moderate	<b>LICENSE NUMBER</b> ATCP-004108
		<b>LICENSEE</b> CHRIST COMMUNITY CHURCH ATCP-L11840	
<b>ESTABLISHMENT PHONE</b> 920 854-2790	<b>ESTABLISHMENT EMAIL</b> office@campzion.com	<b>LICENSEE ADDRESS</b> PO BOX 32 ELLISON BAY, WI 54210	
<b>INSPECTION DATE</b> 7/18/2024	<b>INSPECTION TYPE</b> Routine	<b>FOLLOW-UP REQUIRED - TYPE</b> NO	<b>FOLLOW-UP DATE</b>

### COMMENTS

A new rec ed camp code is in effect as of 9-24-2024. See the department webpage for videos, fact sheets, and forms related to the new code:

[https://datcp.wi.gov/Pages/Programs\\_Services/RecEdCamp.aspx](https://datcp.wi.gov/Pages/Programs_Services/RecEdCamp.aspx)

Inspector will check with program manager on the following:

- Does Red Cross lifeguard training include bloodborne pathogen training or does a separate certification need to be obtained by lifeguards?
- Do personal cell phones qualify as a method of communication for calling emergency service from the waterfront (a landline phone is available in the food service building)?
- Are key locking doors on the Bayview Lodge building acceptable?
- Department training aides for abuse training requirements.

### OBSERVED VIOLATIONS

For detailed code language regarding violations, go to:

[ATCP 78 - Recreational and Educational Camps](#), [WI Food Code](#) and [ATCP 75 Retail Food Establishments](#).

**Correct By** :07/28/2024

Priority Foundation

**Violation Type:** Violation

**Observation:** Agreement did not identify what party has responsibility for code requirements as delineated in 78.16 (c) Agreement Contents.

**Corrective Action:** Written agreement must designate whether the camp or the rental group is responsible and if the rental group is responsible the agreement must list which items specifically the rental group is responsible for in 78.16 (c) 1-12.

**Code Citation:** *ATCP 78.16 (1) (b) Party responsibility for tasks* - Written Agreement

Priority Foundation

**Violation Type:** Violation

**Observation:** A nitrate well water test has not been completed since 5-17-2023.

**Corrective Action:** Provide a nitrate well water test result. The test must be completed annually.

**Code Citation:** *ATCP 78.18 (2) (b) (2.) Year Round Sampling Methods Meet State Requirements - Safe; water sample*

**Correct By :** 08/18/2024

Priority Foundation

**Violation Type:** Violation

**Observation:** The operator has no documentation of the fire alarm system's annual inspection.

**Corrective Action:** Provide documentation of annual service on fire alarm system and maintain on-site. The report can be from a private certified fire testing service or the local fire department.

**Code Citation:** *ATCP 78.24 (8) (e) (2.) Fire Alarm System Inspection - Fire Prevention; notification, extinguisher, alarms, CO*

**Correct By :** 07/28/2024

Priority Foundation

**Violation Type:** Violation

**Observation:** No building evacuation diagram is provided in a sleeping room in [location] with 2 or more exit doors to the outside.

**Corrective Action:** Provide a building evacuation diagram in plain view in each building that has sleeping rooms with 2 or more exit doors to the outside.

**Code Citation:** *ATCP 78.24 (8) (f) (1.) Directions for Escape - Fire Prevention; notification, extinguisher, alarms, CO*

## CRITICAL VIOLATION

Priority - Critical

**Violation Type:** COS

**Observation:** The Bayview Lodge building has staff sleeping quarters and does not have a carbon monoxide detector in the immediate vicinity of the sleeping rooms. The building has a wood burning fireplace that is capable of producing carbon monoxide.

**Corrective Action:** CORRECTED AT THE TIME OF THIS INSPECTION - Provide a carbon monoxide detector in all buildings that have sleeping room units in the immediate vicinity outside of the sleeping room. The operator installed a carbon monoxide detector in the room with the fireplace at this inspection.

**Code Citation:** *ATCP 78.24 (9) (a) Carbon monoxide detection - Fire Prevention; notification, extinguisher, alarms, CO*

**Correct By :** 07/28/2024

Priority Foundation

**Violation Type:** Violation

**Observation:** No policy is available for addressing the employment selection of camp staff after a background check reveals a record of violent crime against a person or animal, crimes against nature where facilitation were affected, any crime involving a child as a victim, or possession or facilitation of child pornography.

**Corrective Action:** Provide a policy that addresses the employment selection of a person after a background check reveals a record of violent crime against a person or animal, crimes against nature where children were affected, any crime involving a child as a victim, or possession or facilitation of child pornography. The policy must be reviewed, signed, and dated within the last 3 years.

**Code Citation:** *ATCP 78.26 (1) (c) (1.) (a.) Background Check Threshold Policy - Background Check; frequency, policy*

**Correct By :** 07/28/2024

Priority Foundation

**Violation Type:** Violation

**Observation:** Signage is not posted that communicates clear safety signals and range commands to control activity at the firing line and during retrieval of arrows or targets.

**Corrective Action:** The trained adult supervisor shall post signage with range rules to control activity at the firing line and during retrieval of arrow or targets.

**Code Citation:** *ATCP 78.26 (3) (a) (4.) (b.) Range Safety Rules Posted - Supervision of specialized program activity; safety; storage*

**Correct By** :07/28/2024

Priority Foundation

**Violation Type:** Violation

**Observation:** Camp lifeguards do not have required bloodborne pathogen training certification documents.

**Corrective Action:** Provide bloodborne pathogen training to all lifeguard staff. The inspector will check with the rec ed camp program manager to see if the Red Cross lifeguard training is inclusive of this requirement.

**Code Citation:** *ATCP 78.26 (3) (c) (4.) Bloodborne pathogen training - Program Aquatics Staff Qualified*

**Correct By** :07/28/2024

Priority Foundation

**Violation Type:** Violation

**Observation:** The written emergency response plan does not include provisions for the frequency of training and rehearsal provided to camp staff.

**Corrective Action:** Include in the camp emergency response plan provisions that address the frequency of training and rehearsal provided to camp staff.

**Code Citation:** *ATCP 78.26 (5) (b) (2.) Frequency of Staff Training - Camp security; emergency written plans*

**Correct By** :07/28/2024

Priority Foundation

**Violation Type:** Violation

**Observation:** No documentation of individuals who completed camper sexual abuse prevention training was provided.

**Corrective Action:** Maintain individual certificate or dated documentation of participants who completed camper sexual abuse prevention training. The inspector will contact the operator by email with department training aides.

**Code Citation:** *ATCP 78.26 (5) (c) (2.) Proof Training Completed - Camper Sexual Abuse Prevention Training*

### **CRITICAL VIOLATION**

**Correct By** :07/28/2024

Priority - Critical

**Violation Type:** Violation

**Observation:** No written procedures or space for the temporary isolation of sick or injured campers and staff members.

**Corrective Action:** Provide written medical procedures and space for the temporary isolation of sick or injured campers and staff.

**Code Citation:** *ATCP 78.27 (1) (f) Health center procedure and space - Health Center; phone; first aid; AED*

**Correct By** :07/28/2024

Priority Foundation

**Violation Type:** Violation

**Observation:** If AED is on premises, camp is not testing the unit in accordance with manufacturer guidelines.

**Corrective Action:** If an AED is on-site, perform required testing in accordance with manufacturer's guidelines.

**Code Citation:** *ATCP 78.27 (1)(i)(2.) AED tested - Health Center; phone; first aid; AED*

**SUPPLEMENTAL INFORMATION**

Is there a letter from EMS indicating they can respond within 15 minutes?: Yes

Initials of IN CAMP holder of first aid and CPR/AED certificate at time of inspection

Course completed for First Aid: MP EMT National Registry of Emergency Medical Technicians

Course completed for CPR/AED:

Initials of WILDERNESS TRIPS holder of First aid and CPR/AED certificate at time of inspection

Course completed for First Aid:

Course completed for CPR/AED:

Initials and Course completed for CPR/AED for any additional health staff member(s) IN CAMP

Course completed for CPR/AED: DS - HSI

Initials and Course of Lifeguard(s) serving during sessions at time of inspection

Lifeguards's Initials: CM, JA, JT, JH

Course completed for First Aid: Red Cross

Course completed for CPR/AED: Red Cross

Course completed for Lifeguard: Red Cross

**CERTIFIED FOOD PROTECTION MANAGER**

Name	Certificate Number	Expiration Date
Carol Stewart	360 Training	05/12/2028

## EQUIPMENT TEMPERATURES

Type	Name	Equipment Temperature
Reach-In Cooler	Beverage cooler by canteen	35 °F
Reach-In Freezer	Ice cream freezer chest type	0 °F
Reach-In Freezer	Turbo Air 2 door	-2 °F
Reach-In Cooler	Norlake 2 door	39 °F
Walk-In Cooler	Norlake (outside)	42 °F
Walk-In Freezer	Norlake (outside)	0 °F
Reach-In Cooler	Milk cooler (outside)	35 °F
Reach-In Cooler	Milk cooler (outside)	35 °F
Reach-In Cooler	Norlake 2 door	39 °F
Walk-In Freezer	Norlake (outside)	0 °F
Reach-In Cooler	Beverage cooler by canteen	35 °F
Reach-In Freezer	Turbo Air 2 door	-2 °F
Walk-In Cooler	Norlake (outside)	42 °F
Reach-In Freezer	Ice cream freezer chest type	0 °F

## FOOD TEMPERATURES

Food Item	Food State	Temperature
pasta dish just thawed in reach in cooler	Thawing	39.0 °F

## WAREWASHING INFORMATION

Machine Name	Sanitization Method	Thermo Label	PPM	Sanitizer Name	Sanitizer Type	Temperature	pH
Dishwashing Machine	Hot water	160				160.0 °F	

*Your signature on this form acknowledges receipt of the inspection report, and is not an agreement with the findings. Signing this form is voluntary. Personally identifiable information you provide may be used for purposes other than that for which it was collected. Wis Stat 15.04(1)(m). Any operator aggrieved by an order of this department under this chapter may request a hearing as provided in Wis. Stat. ch.227, if state licensed; or a local ordinance, licensed by an agent health department.*



**PERSON IN CHARGE - Dale Stewart - Operator**



**SANITARIAN - Craig Kratcha  
Environmental Sanitarian - Senior  
Craig.Kratcha@wisconsin.gov | (920) 868-0133**



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Wis. Stat. § 97.67  
 Subch. IV Wis. Admin. Code  
 ch. ATCP 78

## RECREATIONAL EDUCATIONAL CAMP INSPECTION REPORT

<b>ESTABLISHMENT NAME</b> CAMP NICOLET FOR GIRLS INC		<b>LICENSE TYPE</b> Recreational/Educational Camp - Simple	<b>LICENSE NUMBER</b> ATCP-003470
		<b>LICENSEE</b> CAMP NICOLET INC ATCP-L03276	
<b>ESTABLISHMENT PHONE</b> 715 545-2522	<b>ESTABLISHMENT EMAIL</b> jeremy@campnicolet.com	<b>LICENSEE ADDRESS</b> PO BOX 1359 EAGLE RIVER, WI 54521	
<b>INSPECTION DATE</b> 7/22/2024	<b>INSPECTION TYPE</b> Routine	<b>FOLLOW-UP REQUIRED - TYPE</b> NO	<b>FOLLOW-UP DATE</b>

### COMMENTS

Out of State health service staff- RN registered in a state not included in the interstate system- option A: the RN can be lifeguard certified and take the DPI free course and they would be in compliance OR option B: the RN from Michigan applies for a 90-day waiver and submit to the department.

- The two compartment sink in the back of the kitchen has been designated for handwashing use only. The two compartment sink by the dishwasher is used for limited food preparation, with all other produce coming in pre-washed. A colander is used above the flood rim of the sink for conducting food preparation and melons are sanitized in a designated tub. The sink must be sanitized before and after use as it is also used for soaking dishes. The cook understands the limitations on the sink and that if food preparation needs increase or the sinks are observed being used incorrectly, that a separate food preparation sink and/or hand sink will be required to be ordered in. If when to wash hands is noted for a third inspection in a row a chargeable reinspection will be required, along with a more conveniently located separate hand sink.

We discussed primitive camping, new code requirements, health service procedures, and the lifeguard staffing plan during the inspection.

Joint inspection with Tyler Hischke.

### OBSERVED VIOLATIONS

For detailed code language regarding violations, go to:

[ATCP 78 - Recreational and Educational Camps, WI Food Code](#) and [ATCP 75 Retail Food Establishments](#).

**Correct By** :08/01/2024

Priority Foundation

**Violation Type:** Violation

**Observation:** The Person in Charge (PIC) is not monitoring the handwashing activities of employees.

**Corrective Action:** The person in charge shall ensure that employees are effectively cleaning their hands.

**Code Citation:** 2-103.11 (D) - PERSON IN CHARGE - HANDWASHING

**CRITICAL VIOLATION**

**Correct By** :07/24/2024

Priority - Critical

**Violation Type:** COS

**Observation:** Food employee observed recontaminating hands after washing. Employee was observed drying hands on their shirt.

**Corrective Action:** Train food employees in proper handwashing techniques.

**Code Citation:** 2-301.12 (C) - HANDWASHING PROCEDURE - RECONTAMINATION AFTER WASHING

**REPEAT CRITICAL VIOLATION**

**Correct By** :07/24/2024

Priority - Critical

**Violation Type:** Repeat

**Observation:** Employee observed not washing hands after removing gloves and putting on a new pair of gloves.

**Corrective Action:** Employees shall wash their hands after engaging in any activity that may cause their hands to become contaminated.

**Code Citation:** 2-301.14 - WHEN TO WASH

**Correct By** :08/01/2024

Priority Foundation

**Violation Type:** Violation

**Observation:** Employee observed washing hands in an unapproved sink. Employee was observed washing hands in the dish sink.

**Corrective Action:** Employees shall wash their hands in a designated handwash sink. Handwashing is prohibited in food preparation, warewashing and mop sinks.

**Code Citation:** 2-301.15 - WHERE TO WASH

**Correct By** :08/01/2024

Priority Foundation

**Violation Type:** Violation

**Observation:** The configuration of beds has less than 3 feet horizontally between beds in Fir cabin.

**Corrective Action:** Provide at least 3 feet horizontally between the sides of the beds for proper emergency egress.

**Code Citation:** ATCP 78.21 (1) (a) (4.) *Required Space Between Beds* - Adequate sleeping quarters; capacity

**Correct By** :08/01/2024

Priority Foundation

**Violation Type:** Violation

**Observation:** The top of the guard in the upper bunk bed in Balsam cabin is 2-4 inches above the top of the upper bunk bed mattress.

**Corrective Action:** Provide a guard at least 5 inches above the top of the upper bunk bed mattress.

**Code Citation:** ATCP 78.21 (1) (c) (5.) (a.) *Top Rail Distance Above Mattress* - Bunk bed; platform tent; RV; construction

**Correct By** :08/01/2024

Priority Foundation

**Violation Type:** Violation

**Observation:** No policy is available for addressing the employment selection of camp staff after a background check reveals a record of violent crime against a person or animal, crimes against nature where children were affected, any crime involving a child as a victim, or possession or facilitation of child pornography.

**Corrective Action:** Provide a policy that addresses the employment selection of a person after a background check reveals a record of violent crime against a person or animal, crimes against nature where children were affected, any crime involving a child as a victim, or possession or facilitation of child pornography.

**Code Citation:** ATCP 78.26 (1) (c) (1.)(a.) *Background Check Threshold Policy* - Background Check; frequency, policy



**Correct By** :08/01/2024

Priority Foundation

**Violation Type:** Violation

**Observation:** Thermometer used in food establishment is not accurate to +/- 2°F.

**Corrective Action:** Calibrate or replace thermometer.

**Code Citation:** 4-203.11 - THERMOMETERS - FOOD - ACCURACY

**Correct By** :08/01/2024

Priority Foundation

**Violation Type:** Violation

**Observation:** The camp does not have a lifeguard and attendant staffing plan or a copy available for review by the department or its agent.

**Corrective Action:** Create a lifeguard and attendant staffing plan, maintain a copy on the premises and make available to the department or its agent for review.

**Code Citation:** *ATCP 78.26 (3) (c) (2.) Written Plan - Lifeguard and attendant staffing plan*

### REPEAT

**Correct By** :10/14/2024

Core

**Violation Type:** Repeat

**Observation:** Bulk milk container dispensing tube is improperly cut.

**Corrective Action:** Cut dispensing tube at an angle leaving no more than 1 inch available from the dispensing head.

**Code Citation:** 4-502.13 (B) - SINGLE-USE AND SINGLE SERVICE ARTICLES - DISPENSING TUBE

**Correct By** :10/07/2024

Core

**Violation Type:** Violation

**Observation:** Duct tape is used for repairing the cover of the ice machine is made of a nondurable material.

**Corrective Action:** Provide equipment or utensils that are durable under normal conditions.

**Code Citation:** 4-201.11 - EQUIPMENT AND UTENSILS - DURABILITY AND STRENGTH

### CRITICAL VIOLATION

**Correct By** :07/24/2024

Priority - Critical

**Violation Type:** Violation

**Observation:** For camps that last longer than 3 days, qualified health services staff delegated individual for administering medication has not completed the DPI medication administration online modules. Staff that administer medication on wilderness trips and health service nurses not registered in the interstate agreement must complete the DPI course.

**Corrective Action:** Verify that delegated individuals administering medication complete the DPI medication administration online modules.

**Code Citation:** *ATCP 78.27 (4) (e) Delegated staff medication administration module - Medication administration*

**Correct By** :08/01/2024

Priority Foundation

**Violation Type:** Violation

**Observation:** A death, injury, or illness report was not submitted as required for an incident that required a 911 call for emergency medical response at the camp.

**Corrective Action:** Immediately complete a death, injury, or illness report and submit to the department or its agent.

**Code Citation:** *ATCP 78.29 DII Submitted - D-I-I report not submitted*

Correct By : 10/14/2024

Core

Violation Type: Violation

Observation: The off-site food safety plan is unavailable for review by the department of its agent.

Corrective Action: Maintain a copy of the off-site food safety plan on the camp premises.

Code Citation: ATCP 78.32 (5) (b) Document Available - Off site food safety plan

### SUPPLEMENTAL INFORMATION

Is there are a letter from EMS indicating they can respond within 15 minutes?: Yes

#### Initials of IN CAMP holder of first aid and CPR/AED certificate at time of inspection

Course completed for First Aid: GC-Adult pediatric first aid/CPR

Course completed for CPR/AED: GC-Adult pediatric first aid/CPR

#### Initials of WILDERNESS TRIPS holder of First aid and CPR/AED certificate at time of inspection

Course completed for First Aid: VM- Wilderness first aid

Course completed for CPR/AED: VM- Wilderness first aid

#### Initials and Course completed for CPR/AED for any additional health staff member(s) IN CAMP

Course completed for CPR/AED:

#### Initials and Course of Lifeguard(s) serving during sessions at time of inspection

Lifeguards's Initials: VB, LR, CH, HE

Course completed for First Aid: American Red Cross

Course completed for CPR/AED: American Red Cross

Course completed for Lifeguard: American Red Cross

### CERTIFIED FOOD PROTECTION MANAGER

Name	Certificate Number	Expiration Date
Dennis Carroll		01/28/2025

### EQUIPMENT TEMPERATURES

Type	Name	Equipment Temperature
Reach-In Cooler	Delafield 1 door	39.0 °F
Reach-In Cooler	Manitowoc 3-door	42.0 °F
Walk-In Cooler	Walk in cooler	41.0 °F
Walk-In Freezer	Walk in Freezer	-10.0 °F
Chest Freezer	2 Chest Freezers	-10.0 °F

**FOOD TEMPERATURES**

Food Item	Food State	Temperature
Milk	Cold Holding	39.0 °F
Meatballs (Delafield 1 door)	Cold Holding	39.0 °F
Potato Salad (Manitowoc 3-door)	Cold Holding	44.0 °F
Ranch (Manitowoc 3-door)	Cold Holding	42.0 °F
Sour Cream (Walk in cooler)	Cold Holding	41.0 °F

**WAREWASHING INFORMATION**

Machine Name	Sanitization Method	Thermo Label	PPM	Sanitizer Name	Sanitizer Type	Temperature	pH
Dish Machine	Chemical		100	Intercon	Clorine		

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**PERSON IN CHARGE - Jerney Starz - Camp Owner**



**SANITARIAN - Elizabeth Rettinger**

**elizabeth.rettinger@wisconsin.gov |**



Wisconsin Department of Agriculture, Trade and Consumer Protection  
 Division of Food and Recreational Safety  
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*Wis. Stat. § 97.67*  
*Subch. IV Wis. Admin. Code*  
*ch. ATCP 78*

## RECREATIONAL EDUCATIONAL CAMP INSPECTION REPORT

<b>ESTABLISHMENT NAME</b> LAKE GENEVA FOUNDATION		<b>LICENSE TYPE</b> Recreational/Educational Camp - Complex with Hospitality		<b>LICENSE NUMBER</b> ATCP-010241
		<b>LICENSEE</b> LAKE GENEVA YOUTH CAMP ATCP-L14285		
<b>ESTABLISHMENT PHONE</b> (262) 248 - 5500	<b>ESTABLISHMENT EMAIL</b> christiaan.snedeker@lgyc.org	<b>LICENSEE ADDRESS</b> W2655 SOUTH ST LAKE GENEVA, WI 53147		
<b>INSPECTION DATE</b> 7/30/2024	<b>INSPECTION TYPE</b> Routine	<b>FOLLOW-UP REQUIRED - TYPE</b> NO	<b>FOLLOW-UP DATE</b>	

### COMMENTS

Reviewed the written notification of intent to operate, continue to notify local emergency response services of intent to operate on a yearly basis.

Low element challenge course and wooden slide are currently not in operation.

Experiential System Report from 4/15/24 indicated that the low element challenge course was not inspected due to trees hanging on the ropes. The crate course was not available for the 3rd party to inspect. Please ensure these courses are inspected before the next season begins.

Recommend replacing the wood chips for the swing set to ensure adequate protective surfacing.

For the specialized program activities, please ensure documentation is on site for staff training on these activities.

This was a joint inspection between Adam Barningham, Shannon Johnson-Windsor and Stephanie Sticka.

Due to this being a training inspection, the food facilities were not inspected today. The food inspections will be completed on a future date.

## OBSERVED VIOLATIONS

For detailed code language regarding violations, go to:

[ATCP 78 - Recreational and Educational Camps, WI Food Code](#) and [ATCP 75 Retail Food Establishments](#).

Priority Foundation

**Violation Type:** Violation

**Observation:** Due to the recent revision of ATCP 78, rental agreement for 7/29-8/1 stay did not include responsibility for collecting health histories.

**Corrective Action:** Written agreement must include responsibility for party collecting camper and staff health histories.

**Code Citation:** *ATCP 78.16 (1) (c) (4.) Health History Collection* - Written Agreement

Priority Foundation

**Violation Type:** Violation

**Observation:** Due to the recent revision of ATCP 78, agreement did not include confirmation of sexual abuse prevention training for rental group leaders for the stay spanning from 7/29-8/1.

**Corrective Action:** Written agreement must include confirmation of rental group leaders sexual abuse prevention training was completed.

**Code Citation:** *ATCP 78.16 (1) (c) (10.) Sexual Abuse Prevention Training* - Written Agreement

Priority Foundation

**Violation Type:** Violation

**Observation:** Due to the recent revision of ATCP 78, the agreement did not include confirmation of background checks for rental group leaders for the stay spanning from 7/29-8/1.

**Corrective Action:** Written agreement must include confirmation of rental group leaders background check was completed.

**Code Citation:** *ATCP 78.16 (1) (c) (9.) Background Check* - Written Agreement

Priority Foundation

**Violation Type:** Violation

**Observation:** Due to the recent revision of ATCP 78, rental agreement did not include health services documentation requirements for the 7/29-8/1 stay.

**Corrective Action:** Written agreement must include responsibility for party documenting medication administration and treatment.

**Code Citation:** *ATCP 78.16 (1) (c) (5.) Health Documentation* - Written Agreement

Priority Foundation

**Violation Type:** Violation

**Observation:** Due to the recent revision of ATCP 78, The written use agreement did not clearly identify the responsibilities of the camp and the rental group to report death, injury and illness for the stay spanning from 7/29-8/1.

**Corrective Action:** Complete a death, injury, or illness report on the discussed incident immediately to comply with the requirement.

**Code Citation:** *ATCP 78.16 (1) (c) (12.) DII Reporting* - Death, Injury, Illness Reporting

**CRITICAL VIOLATION**

**Correct By** :08/01/2024

Priority - Critical

**Violation Type:** Violation

**Observation:** The septic cover is not locked/chained for the tank near the welcome center.

**Corrective Action:** Referral has been made to DSPS. Provide documentation that the repairs are in compliance with the state plumbing code.  
\*Imminent marking

**Code Citation:** *ATCP 78.19 (4) (a) (1.) Private Septic System Maintained Per State Plumbing Code - Sewage/waste disposal system; constructed and connected*

**CRITICAL VIOLATION**

**Correct By** :08/01/2024

Priority - Critical

**Violation Type:** Violation

**Observation:** Due to the recent revision of ATCP 78, Shower room floors are not provided with anti-slip surfacing in cabin #9.

**Corrective Action:** Provide shower room with slip resistant covering or matting.

**Code Citation:** *ATCP 78.20 (1) (i) (2.) Shower Room Anti-Slip Floor or Mat - Toilet and shower facilities maintained*

Priority Foundation

**Violation Type:** Violation

**Observation:** The background check threshold policy has not been reviewed and signed within the last 3 years. Due to the new revision of ATCP 78, a background check policy that prevents employment or volunteer selection of any person who meet any of the following:

- a. A record of a violent crime against a person or animal. Pf
- b. Crimes against nature where children were affected. Pf
- c. Any crime involving a child as the victim. Pf
- d. Possession or facilitation of child pornography. Pf

**Corrective Action:** Provide an up-to-date policy reviewed, signed, and dated every 3 years.

**Code Citation:** *ATCP 78.26 (1) (c) (2.) Policy Signed - Background Check; frequency, policy*

**Violation Type:** Violation

**Observation:** Due to the recent revision of ATCP 78, staff assisting with specialized program for do not have record of prior training relevant to that activity.

**Corrective Action:** Provide documentation of camp staff training that assist with a specialized program activity. Each camp staff shall receive the relevant training for each specialized program activity they are assigned to.

**Code Citation:** *ATCP 78.26 (3) (a) (3.) Documented Staff Training - Supervision of specialized program activity; safety; storage*

Priority Foundation

**Violation Type:** Violation

**Observation:** Due to the recent revision to ATCP 78, the lifeguard and attendant staffing plan does not include a diagram of all the aquatic areas used by campers.

**Corrective Action:** Include a diagram of all aquatic activity areas on the premises in the lifeguard and attendant staffing plan.

**Code Citation:** *ATCP 78.26 (3) (c) (2.) (a.) Diagram of waterfront - Lifeguard and attendant staffing plan*

## CRITICAL VIOLATION

Priority - Critical

**Violation Type:** Violation

**Observation:** Due to the recent revision of ATCP 78, The camp does not have emergency information attached or posted near the telephone including emergency numbers, 911, and facility's location.

**Corrective Action:** Post signage or attach to the phone the camp address and how to dial 911.

**Code Citation:** *ATCP 78.27 (1) (h) (4.) Posted emergency information - Health Center; phone; first aid; AED*

## CRITICAL VIOLATION

**Correct By :** 08/01/2024

Priority - Critical

**Violation Type:** Violation

**Observation:** Swing set S-hooks are not maintained closed. There are three S-hooks on the swings that have a gap greater than 0.04 inches.

**Corrective Action:** Replace or repair all open S- hooks on playground equipment to prevent camper injury.

**Code Citation:** *ATCP 78.30 (2) (a) (1.) "S" hooks - Playground Equipment*

## SUPPLEMENTAL INFORMATION

Is there are a letter from EMS indicating they can respond within 15 minutes?: No

Initials of IN CAMP holder of first aid and CPR/AED certificate at time of inspection

Course completed for First Aid: DLM 81809-30

Course completed for CPR/AED: American Red Cross: Lifeguarding with CPR/AED for Professional Rescuers and First Aid

Initials of WILDERNESS TRIPS holder of First aid and CPR/AED certificate at time of inspection

Course completed for First Aid: N/A

Course completed for CPR/AED: N/A

Initials and Course completed for CPR/AED for any additional health staff member(s) IN CAMP

Course completed for CPR/AED: American Red Cross: Lifeguarding with CPR/AED for Professional Rescuers and First Aid

Initials and Course of Lifeguard(s) serving during sessions at time of inspection

Lifeguards's Initials: HD

Course completed for First Aid: American Red Cross: Lifeguarding with CPR/AED for Professional Rescuers and First Aid

Course completed for CPR/AED: American Red Cross: Lifeguarding with CPR/AED for Professional Rescuers and First Aid

Course completed for Lifeguard: American Red Cross: Lifeguarding with CPR/AED for Professional Rescuers and First Aid

## CERTIFIED FOOD PROTECTION MANAGER

Name	Certificate Number	Expiration Date
Danielle Hegwood		09/05/2024

## EQUIPMENT TEMPERATURES

Type	Name	Equipment Temperature
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**FOOD TEMPERATURES**

Food Item	Food State	Temperature
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**WAREWASHING INFORMATION**

Machine Name	Sanitization Method	Thermo Label	PPM	Sanitizer Name	Sanitizer Type	Temperature	pH
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**PERSON IN CHARGE - Anthony Ramirez - Co-program Director**



**SANITARIAN - Adam Barningham**

**adam.barningham1@wisconsin.gov |**





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Wis. Stat. § 97.67  
 Subch. IV Wis. Admin. Code  
 ch. ATCP 78

## RECREATIONAL EDUCATIONAL CAMP INSPECTION REPORT

<b>ESTABLISHMENT NAME</b>		<b>LICENSE TYPE</b>	<b>LICENSE NUMBER</b>
EASTER SEAL CENTER FOR CAMPING & RECREATION		Recreational/Educational Camp - Simple	ATCP-010234
		<b>LICENSEE</b>	
		EASTER SEAL CENTER FOR CAMPING & RECREATION ATCP-L15735	
<b>ESTABLISHMENT PHONE</b>	<b>ESTABLISHMENT EMAIL</b>	<b>LICENSEE ADDRESS</b>	
608 254-2502 190	apeters@eastersealswisconsin.com	8001 EXCELSIOR DR SUITE 200 MADISON, WI 53717	
<b>INSPECTION DATE</b>	<b>INSPECTION TYPE</b>	<b>FOLLOW-UP REQUIRED - TYPE</b>	<b>FOLLOW-UP DATE</b>
8/9/2024	Routine	NO	

### COMMENTS

Routine inspection conducted by Sanitarian Joseph Vue and Caitlin Jehn.

During the inspection, facilities inspected are the campers sleeping area, ospray house, owl house, nursing station, off-site high ropes course, challenge course, and low element challenge course. Archery is stored offsite and will be discontinued as the active trained individual is leaving the facility. Updated trained individual will be needed prior to operating this section. Campers here are always supervised.

Sanitarian suggests fixing door for the outside camping room. Sanitarian also suggests fixing the broken element in the gym.

### OBSERVED VIOLATIONS

For detailed code language regarding violations, go to:

[ATCP 78 - Recreational and Educational Camps](#), [WI Food Code](#) and [ATCP 75 Retail Food Establishments](#).

Priority Foundation

**Violation Type:** Violation

**Observation:** No hot or tempered water is provided at the girls' large bathroom hand washing sink. Boys' handwashing sinks also not functioning but was corrected during the inspection.

**Corrective Action:** Provide hot and cold water or tempered water (85°F to 110°F) to all hand washing sinks in toilet rooms having flush toilets and at all shower or bathing facilities [Tempered water must be available for handwashing in all toilet rooms with flush toilets, and for bathing or showering. An exception is a toilet building with flush toilets that is not part of a heated building and used only seasonally (March 16-November 14)- tempered water may be replaced with cold water. Also, for a toilet building that does not have sinks in the toilet building but rather located outside the toilet building, this water may also be cold instead of tempered].

**Code Citation:** *ATCP 78.20 (1) (h) (1.) Tempered Water Available* - Toilet and shower facilities maintained

Priority Foundation

**Violation Type:** Violation

**Observation:** The configuration of beds has less than 3 horizontally between beds in third boys' bedroom across from the bathroom. Interior wall extending out reduces the aisle to under 3 feet.

Owl, staff cabin missing 3 feet spacing between beds.

**Corrective Action:** Provide at least 3 feet horizontally between the sides of the beds for proper emergency egress.

**Code Citation:** *ATCP 78.21 (1) (a) (4.) Required Space Between Beds* - Adequate sleeping quarters; capacity

**CRITICAL VIOLATION**

**Correct By :**08/09/2024

Priority - Critical

**Violation Type:** COS

**Observation:** Pizza bucket is cold held at 50-55°F.

**Corrective Action:** Maintain cold time/temperature control for safety food at or below 41°F. Discard unsafe food items.

**Code Citation:** *3-501.16 (A) (2) AND (B)* - TCS FOOD - COLD HOLDING

**Correct By :**08/09/2024

Priority Foundation

**Violation Type:** COS

**Observation:** Window screening or individual camper mosquito-type netting missing from panda room.

**Corrective Action:** Provide 16 mesh wire or other effective screening on all windows that can be opened where campers sleep or provide individual mosquito-type netting. Window screening was placed during inspection.

**Code Citation:** *ATCP 78.21 (1) (d) (1.) and (2.) Effective Screening Options* - Adequate bedding and screening provided

**Correct By :**08/10/2024

Core

**Violation Type:** Violation

**Observation:** Foods stored underneath camper's pizza box, is not protected from potential contamination.

**Corrective Action:** Discard food item contaminated and remove camper's pizza box from service food.

**Code Citation:** *3-307.11* - FOOD CONTAMINATION PREVENTED - MISCELLANEOUS CONTAMINATION

Core

**Violation Type:** Violation

**Observation:** Walk in freezer is observed to have build-up of ice on boxes and on the floor.

**Corrective Action:** Maintain the physical facilities so they are in good repair at all times. Repair and clean walk in freezer.

**Code Citation:** *6-501.11* - REPAIRING - PREMISES, STRUCTURES, ATTACHMENTS, AND FIXTURES - METHODS

## SUPPLEMENTAL INFORMATION

Is there a letter from EMS indicating they can respond within 15 minutes?: Yes

### Initials of IN CAMP holder of first aid and CPR/AED certificate at time of inspection

Course completed for First Aid: Amanda Verhagen - 12/25

Course completed for CPR/AED: Amanda Verhagen - 12/25

### Initials of WILDERNESS TRIPS holder of First aid and CPR/AED certificate at time of inspection

Course completed for First Aid: N/A

Course completed for CPR/AED: N/A

### Initials and Course completed for CPR/AED for any additional health staff member(s) IN CAMP

Course completed for CPR/AED:

### Initials and Course of Lifeguard(s) serving during sessions at time of inspection

Lifeguards's Initials: N/A

Course completed for First Aid: N/A

Course completed for CPR/AED: N/A

Course completed for Lifeguard: N/A

## CERTIFIED FOOD PROTECTION MANAGER

Name	Certificate Number	Expiration Date
Connie Schmidt	20237085	02/12/2026

## EQUIPMENT TEMPERATURES

Type	Name	Equipment Temperature
Walk-In Cooler	Walk in cooler	35.0 °F
	2 door cooler	40.0 °F
	traulsen freezer	7.0 °F
	beverage air freezer	4.1 °F
	bread 2 door freezer	-1.0 °F
	beverage air cooler	35.0 °F

**FOOD TEMPERATURES**

Food Item	Food State	Temperature
traulsen 2 door cooler - chicken	Cold Holding	40.0 °F
traulsen 2 door - pizza bucket	Cold Holding	53.0 °F
traulsen 2 door cooler - hashbrowns	Cold Holding	41.0 °F
walk in cooler - eggs	Cold Holding	34.0 °F
vegetarian Lasagna	Hot Holding	177.0 °F
beverage air cooler - milk	Cold Holding	34.0 °F

**WAREWASHING INFORMATION**

Machine Name	Sanitization Method	Thermo Label	PPM	Sanitizer Name	Sanitizer Type	Temperature	pH
High Temp Dish Machine	Heat	Greater than 160				160.0 °F	

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**PERSON IN CHARGE - Amanda Verhagen - Director**



**SANITARIAN - Joseph Vue**

**joseph.vue@wisconsin.gov | (608) 720-0697**



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Wis. Stat. § 97.67  
 Subch. IV Wis. Admin. Code  
 ch. ATCP 78

## RECREATIONAL EDUCATIONAL CAMP INSPECTION REPORT

<b>ESTABLISHMENT NAME</b> SUGAR CREEK BIBLE CAMP		<b>LICENSE TYPE</b> Recreational/Educational Camp - Simple	<b>LICENSE NUMBER</b> ATCP-010246
		<b>LICENSEE</b> SUGAR CREEK BIBLE CAMP ASSOCIATION ATCP-L12705	
<b>ESTABLISHMENT PHONE</b> 608 734-3113	<b>ESTABLISHMENT EMAIL</b> camp@sgrcreek.org	<b>LICENSEE ADDRESS</b> 13141 SUGAR CREEK BIBLE CAMP RD FERRVILLE, WI 54628	
<b>INSPECTION DATE</b> 8/9/2024	<b>INSPECTION TYPE</b> Routine	<b>FOLLOW-UP REQUIRED - TYPE</b> NO	<b>FOLLOW-UP DATE</b>

### COMMENTS

The license is switched from simple to moderate due to a new assessment. The license will cost a little more at renewal.

Some of the smoke detectors will need replaced prior to next season because they will be over 10 years old by then.

The camp now keeps the medical records electronically with the use of the program Camp Wise.

The rec ed camp looks good!

### OBSERVED VIOLATIONS

For detailed code language regarding violations, go to:

[ATCP 78 - Recreational and Educational Camps](#), [WI Food Code](#) and [ATCP 75 Retail Food Establishments](#).

### **CRITICAL VIOLATION**

Priority - Critical

**Violation Type:** COS

**Observation:** Campers were self-serving slices of bread without the use on tongs.

**Corrective Action:** Either have servers with single use gloves serve the bread or provide tongs for self-service.

**Code Citation:** 3-301.11 (B) - NO BARE HAND CONTACT WITH RTE-FOODS

**SUPPLEMENTAL INFORMATION**

Is there a letter from EMS indicating they can respond within 15 minutes?: Yes

Initials of IN CAMP holder of first aid and CPR/AED certificate at time of inspection

Course completed for First Aid: RR

Course completed for CPR/AED: RR

Initials of WILDERNESS TRIPS holder of First aid and CPR/AED certificate at time of inspection

Course completed for First Aid:

Course completed for CPR/AED:

Initials and Course completed for CPR/AED for any additional health staff member(s) IN CAMP

Course completed for CPR/AED:

Initials and Course of Lifeguard(s) serving during sessions at time of inspection

Lifeguards's Initials: MD

Course completed for First Aid: Red Cross

Course completed for CPR/AED: Red Cross

Course completed for Lifeguard: Red Cross

**CERTIFIED FOOD PROTECTION MANAGER**

<b>Name</b>	<b>Certificate Number</b>	<b>Expiration Date</b>
Wanda Reschke		10/24/2027

**EQUIPMENT TEMPERATURES**

<b>Type</b>	<b>Name</b>	<b>Equipment Temperature</b>
Walk-In Cooler	Walk in Cooler	39.0 °F
Walk-In Freezer	Walk in Freezer	0.0 °F
Reach-In Cooler	Refrigerator	40.0 °F

**FOOD TEMPERATURES**

Food Item	Food State	Temperature
Taco meat cook	Cook	176.0 °F
Corn	Hot Holding	146.0 °F
Cheese in walk in cooler	Cold Holding	39.0 °F
Orange juice in refrigerator	Cold Holding	40.0 °F

**WAREWASHING INFORMATION**

Machine Name	Sanitization Method	Thermo Label	PPM	Sanitizer Name	Sanitizer Type	Temperature	pH
Dishwasher	Chemical		100	TMA	Chlorine		
Sanitizer bucket	Chemical		100	Bleach	Chlorine		

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**PERSON IN CHARGE - -**

**SANITARIAN - James Udelhoven  
Environmental Health Sanitarian Sr  
james.udelhoven@wisconsin.gov | (608) 778-0658**



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Wis. Stat. § 97.67  
 Subch. IV Wis. Admin. Code  
 ch. ATCP 78

## RECREATIONAL EDUCATIONAL CAMP INSPECTION REPORT

<b>ESTABLISHMENT NAME</b> Hunt Hill Nature Center		<b>LICENSE TYPE</b> Recreational/Educational Camp - Simple	<b>LICENSE NUMBER</b> ATCP-010256
		<b>LICENSEE</b> Hunt Hill Nature Center, Inc ATCP-L12423	
<b>ESTABLISHMENT PHONE</b> (715) 635 - 6543	<b>ESTABLISHMENT EMAIL</b> director@hunthill.org	<b>LICENSEE ADDRESS</b> N2384 HUNT HILL RD SARONA, WI 54870	
<b>INSPECTION DATE</b> 10/29/2024	<b>INSPECTION TYPE</b> Routine	<b>FOLLOW-UP REQUIRED - TYPE</b> NO	<b>FOLLOW-UP DATE</b>

### COMMENTS

This was a joint inspection with Stephanie Sticka. The camp was not operating while we were inspecting.

We looked at rooms in Cross (North, East, South and West) and Long Cabin (2,3, 16,17).

### OBSERVED VIOLATIONS

For detailed code language regarding violations, go to:

[ATCP 78 - Recreational and Educational Camps](#), [WI Food Code](#) and [ATCP 75 Retail Food Establishments](#).

#### **CRITICAL VIOLATION**

**Correct By** :05/30/2025

Priority - Critical

**Violation Type:** Violation

**Observation:** Shower room floors are not provided with anti-slip surfacing.

**Corrective Action:** Provide shower room with slip resistant covering or matting.

**Code Citation:** *ATCP 78.20 (1) (i) (2.) Shower Room Anti-Slip Floor or Mat* - Toilet and shower facilities maintained

**Correct By** :05/30/2025

Core

**Violation Type:** Violation

**Observation:** Elevated surface, 24" or more on the north and east exit of cross cabin without adequate guards.

**Corrective Action:** Provide guards on elevated surfaces more than 24 inches above the floor or grade with spacing of 4 3/8 inches or add more fill underneath the landing.

**Code Citation:** *ATCP 78.24 (2) (b) (1.) (b.) Elevated Surface Guard Needed* - Building code; handrails, guards, and stairs



## SUPPLEMENTAL INFORMATION

Is there a letter from EMS indicating they can respond within 15 minutes?: Yes

Initials of IN CAMP holder of first aid and CPR/AED certificate at time of inspection

Course completed for First Aid: SD

Course completed for CPR/AED: SD

Initials of WILDERNESS TRIPS holder of First aid and CPR/AED certificate at time of inspection

Course completed for First Aid: NO

Course completed for CPR/AED: NO

Initials and Course completed for CPR/AED for any additional health staff member(s) IN CAMP

Course completed for CPR/AED: NJ

Initials and Course of Lifeguard(s) serving during sessions at time of inspection

Lifeguards's Initials: MG Lifeguarding with CPR/AED for Professional Rescuers and First Aid

Course completed for First Aid: MG Lifeguarding with CPR/AED for Professional Rescuers and First Aid

Course completed for CPR/AED: MG Lifeguarding with CPR/AED for Professional Rescuers and First Aid

Course completed for Lifeguard: MG Lifeguarding with CPR/AED for Professional Rescuers and First Aid

## CERTIFIED FOOD PROTECTION MANAGER

Name	Certificate Number	Expiration Date
Sage Dunham	3305357	02/06/2029

## EQUIPMENT TEMPERATURES

Type	Name	Equipment Temperature
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## FOOD TEMPERATURES

Food Item	Food State	Temperature
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## WAREWASHING INFORMATION

Machine Name	Sanitization Method	Thermo Label	PPM	Sanitizer Name	Sanitizer Type	Temperature	pH
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*Your signature on this form acknowledges receipt of the inspection report, and is not an agreement with the findings. Signing this form is voluntary. Personally identifiable information you provide may be used for purposes other than that for which it was collected. Wis Stat. §15.04(1)(m). Any operator aggrieved by an order of this department under this chapter may request a hearing as provided in Wis. Stat. ch.227, if state licensed; or a local ordinance, licensed by an agent health department.*



**PERSON IN CHARGE - Nicole Janisin - Director**



**SANITARIAN - Katelyn Halama  
Environmental Health Sanitarian  
katelyn.halama@wisconsin.gov | (608) 381-8351**



Wisconsin Department of Agriculture, Trade and Consumer Protection  
 Division of Food and Recreational Safety  
 PO Box 8911 Madison, WI 53708-8911  
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Wis. Stat. § 97.67  
 Subch. IV Wis. Admin. Code  
 ch. ATCP 78

## RECREATIONAL EDUCATIONAL CAMP INSPECTION REPORT

<b>ESTABLISHMENT NAME</b> YMCA CAMP U-NAH-LI-YA		<b>LICENSE TYPE</b> Recreational/Educational Camp - Complex	<b>LICENSE NUMBER</b> ATCP-010254
<b>ESTABLISHMENT ADDRESS</b>		<b>LICENSEE</b> GREEN BAY YMCA ATCP-L11105	
<b>ESTABLISHMENT PHONE</b> (715) 276 - 7116	<b>ESTABLISHMENT EMAIL</b> max.clark@greenbayymca.org	<b>LICENSEE ADDRESS</b> 12101 YCAMP RD SURING, WI 54174	
<b>INSPECTION DATE</b> 7/9/2024	<b>INSPECTION TYPE</b> Routine	<b>FOLLOW-UP REQUIRED - TYPE</b> NO	<b>FOLLOW-UP DATE</b>

### COMMENTS

Five wells tested negative September 27 & 28, 2023.

Discussed new code requirements. Inspected Cabin 2 and 12.

### OBSERVED VIOLATIONS

For detailed code language regarding violations, go to:

[ATCP 78 - Recreational and Educational Camps](#), [WI Food Code](#) and [ATCP 75 Retail Food Establishments](#).

**Correct By** :07/19/2024

Priority Foundation

**Violation Type:** Violation

**Observation:** Food establishment does not have procedures that address responding to vomiting or diarrheal events.

**Corrective Action:** Develop procedures for responding to vomiting and diarrheal events. Specifically actions that employees must take to minimize the spread of contamination.

**Code Citation:** 2-501.11 - CLEAN-UP OF VOMITING AND DIARRHEAL EVENTS

**Correct By** :07/19/2024

Priority Foundation

**Violation Type:** COS

**Observation:** Water temperature for the sanitization rinse in the high temperature ware washing machine is at less than 180° F.

**Corrective Action:** Adjust the water temperature so the hot water is between [ °F] and 194 °F or have the unit serviced immediately. Food establishment shall cease operations unless alternative warewashing is available. [Describe].

**Code Citation:** 4-501.112 - FOOD CONTACT SURFACES - MECHANICAL WAREWASHING EQUIPMENT, HOT WATER SANITIZATION TEMPERATURES

Priority Foundation

**Violation Type:** COS

**Observation:** The configuration of beds has less than 6 feet between the heads of campers.

**Corrective Action:** Provide at least 6 feet horizontally between the heads of campers.

**Code Citation:** *ATCP 78.21 (1) (a) (3.) Required Space Between Heads - Adequate sleeping quarters; capacity*

**CRITICAL VIOLATION**

**Correct By :**07/12/2024

Priority - Critical

**Violation Type:** Violation

**Observation:** Guards on top rails in cabin 2 are less than five inches above the mattress.

**Corrective Action:** Restrict campers sleeping on top bunk beds until adequate guards are provided.

**Code Citation:** *ATCP 78.21 (1) (c) (5.) Guardrail Required - Bunk bed; platform tent; RV; construction*

**CRITICAL VIOLATION**

Priority - Critical

**Violation Type:** COS

**Observation:** Turkey sausage in walk in cooler has exceeded its date mark.

**Corrective Action:** Discard ready-to-eat Time/Temperature Control for Safety Food requiring a date mark that has exceeded the discard date or has not been provided with a date mark.

**Code Citation:** *3-501.18 (A) - DATE MARKING - DISPOSITION*

Priority Foundation

**Violation Type:** COS

**Observation:** Check in and out board was not being utilized at the waterfront during inspection.

**Corrective Action:** An approved method of checking persons in and out of the water shall be provided by the adult aquatic supervisor.

**Code Citation:** *ATCP 78.26 (3) (c) (9.) (d.) Check-In Check-Out Method - Swimmer accountability in water; boating*

**CRITICAL VIOLATION**

**Correct By :**07/12/2024

Priority - Critical

**Violation Type:** Violation

**Observation:** A direct connection exists between the sewage system and a drain from food prep sink and sewer.

**Corrective Action:** Design the sewage system in a manner that would preclude a direct connection between the sewage system and the drain from which food is placed. Remove the direct connection.

**Code Citation:** *5-402.11 - SEWAGE - BACKFLOW PREVENTION*

**Correct By :**08/09/2024

Core

**Violation Type:** Violation

**Observation:** The snack shack where ice cream is stored does not have smooth and easily cleanable floors and walls.

**Corrective Action:** Provide floors, walls, and ceilings that are designed, constructed, and installed so they are smooth and easily cleanable.

**Code Citation:** *6-201.11 - FLOORS, WALLS AND CEILINGS - CLEANABILITY*

**CRITICAL VIOLATION**

**Correct By** :07/12/2024

Priority - Critical

**Violation Type:** Violation

**Observation:** Prescription medications brought to camp by a camper are not in containers that are clearly labeled with the date prescribed.

**Corrective Action:** Verify that all medications that are surrendered by campers to on-site health services staff are clearly labeled to include the date medication prescribed.

**Code Citation:** *ATCP 78.27 (4) (a) (1.) (h.) Medications labeled date prescribed* - Medications labeled and kept locked

**SUPPLEMENTAL INFORMATION**

Is there are a letter from EMS indicating they can respond within 15 minutes?: Yes

Initials of IN CAMP holder of first aid and CPR/AED certificate at time of inspection

Course completed for First Aid: CN American Red Cross First Aid

Course completed for CPR/AED: DC American Heart Association

Initials of WILDERNESS TRIPS holder of First aid and CPR/AED certificate at time of inspection

Course completed for First Aid: AN Wilderness Medical Associations International First Aid

Course completed for CPR/AED: AN American Red Cross CPR/AED

Initials and Course completed for CPR/AED for any additional health staff member(s) IN CAMP

Course completed for CPR/AED: JU American Red Cross First Aid

Initials and Course of Lifeguard(s) serving during sessions at time of inspection

Lifeguards's Initials: CS, JZ, IZ,

Course completed for First Aid: CS, JZ, IZ

Course completed for CPR/AED: CS, JZ, IZ

Course completed for Lifeguard: American Red Cross

**CERTIFIED FOOD PROTECTION MANAGER**

Name	Certificate Number	Expiration Date
Theresa Warrner	22025551	04/25/2027

**EQUIPMENT TEMPERATURES**

Type	Name	Equipment Temperature
Reach-In Cooler	2 door Hoshizaki	41.0 °F
Walk-In Cooler	Walk in cooler	40.0 °F
Walk-In Freezer	walk in freezer	0.0 °F
Chest Freezer	Chest freezer	0.0 °F

**FOOD ITEM AND LOCATION**

Food Item	Food State	Temperature
hamburger taco meat	Cook	167.0 °F
beans	Hot Holding	171.0 °F
milk in hoshizaki cooler	Cold Holding	41.0 °F
sour cream in WIC	Cold Holding	37.0 °F
sausages in WIC	Cold Holding	38.0 °F

**SANITIZING AND WAREWASHING**

Machine Name	Sanitization Method	Thermo Label	PPM	Sanitizer Name	Sanitizer Type	Temperature	pH
High Temp machine	high temp	fail					
three compartment sink	chemical		200		Germicidal Bleach		

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**PERSON IN CHARGE - Max Clark - Executive Director**



**SANITARIAN - Sarah Scanlan**

**Sarah.Scanlan@wisconsin.gov |**



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 Division of Food and Recreational Safety  
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Wis. Stat. § 97.67  
 Subch. IV Wis. Admin. Code  
 ch. ATCP 78

## RECREATIONAL EDUCATIONAL CAMP INSPECTION REPORT

<b>ESTABLISHMENT NAME</b> CAMP NAN A BO SHO		<b>LICENSE TYPE</b> Recreational/Educational Camp - Complex with Hospitality		<b>LICENSE NUMBER</b> ATCP-010251
		<b>LICENSEE</b> YMCA OF THE FOX CITIES ATCP-L18613		
<b>ESTABLISHMENT PHONE</b> (715) 276 - 6084	<b>ESTABLISHMENT EMAIL</b> dpolzin@ymcafoxcities.org	<b>LICENSEE ADDRESS</b> 218 E LAWRENCE ST APPLETON, WI 54911		
<b>INSPECTION DATE</b> 7/30/2024	<b>INSPECTION TYPE</b> Administrative Follow-Up	<b>FOLLOW-UP REQUIRED - TYPE</b> NO	<b>FOLLOW-UP DATE</b>	

### COMMENTS

- The operator has provided proof of new smoke detectors that were provided in the yurts. This is an administrative follow up and does incur a fee of \$200 that will be invoiced to by the department.

- No signature was obtained due to being an administrative follow up.

### OBSERVED VIOLATIONS

For detailed code language regarding violations, go to:

[ATCP 78 - Recreational and Educational Camps](#), [WI Food Code](#) and [ATCP 75 Retail Food Establishments](#).

**SUPPLEMENTAL INFORMATION**

Is there a letter from EMS indicating they can respond within 15 minutes?:

Initials of IN CAMP holder of first aid and CPR/AED certificate at time of inspection

Course completed for First Aid:

Course completed for CPR/AED:

Initials of WILDERNESS TRIPS holder of First aid and CPR/AED certificate at time of inspection

Course completed for First Aid:

Course completed for CPR/AED:

Initials and Course completed for CPR/AED for any additional health staff member(s) IN CAMP

Course completed for CPR/AED:

Initials and Course of Lifeguard(s) serving during sessions at time of inspection

Lifeguards's Initials:

Course completed for First Aid:

Course completed for CPR/AED:

Course completed for Lifeguard:

**CERTIFIED FOOD PROTECTION MANAGER**

Name	Certificate Number	Expiration Date
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**EQUIPMENT TEMPERATURES**

Type	Name	Equipment Temperature
Walk-In Cooler	Walk in Cooler	
Reach-In Freezer	Standing freezer x2	
Reach-In Cooler	Traulsen 4Dr RIC	
Walk-In Freezer	Walk in Freezer	
Reach-In Freezer	Retail ice cream freezer (Trading Post)	
Walk-In Freezer	Walk in Freezer	
Reach-In Cooler	Traulsen 4Dr RIC	
Reach-In Freezer	Retail ice cream freezer (Trading Post)	
Reach-In Freezer	Standing freezer x2	
Walk-In Cooler	Walk in Cooler	



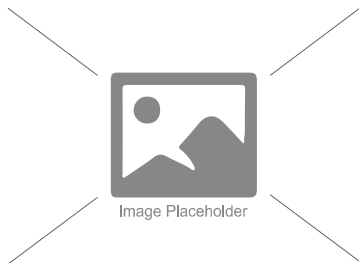
**FOOD ITEM AND LOCATION**

Food Item	Food State	Temperature
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**SANITIZING AND WAREWASHING**

Machine Name	Sanitization Method	Thermo Label	PPM	Sanitizer Name	Sanitizer Type	Temperature	pH
3 Compartment Sink	Chemical/Manual						
High Temperature DishMachine	High temp						

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**PERSON IN CHARGE - -**

**SANITARIAN - Tyler Hischke**

**tyler.hischke@wisconsin.gov | (608) 772-9826**



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Wis. Stat. § 97.67  
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 ch. ATCP 78

## RECREATIONAL EDUCATIONAL CAMP INSPECTION REPORT

<b>ESTABLISHMENT NAME</b> CAMP NAN A BO SHO		<b>LICENSE TYPE</b> Recreational/Educational Camp - Complex with Hospitality		<b>LICENSE NUMBER</b> ATCP-010251
		<b>LICENSEE</b> YMCA OF THE FOX CITIES ATCP-L18613		
<b>ESTABLISHMENT PHONE</b> (715) 276 - 6084	<b>ESTABLISHMENT EMAIL</b> dpolzin@ymcafoxcities.org	<b>LICENSEE ADDRESS</b> 218 E LAWRENCE ST APPLETON, WI 54911		
<b>INSPECTION DATE</b> 7/23/2024	<b>INSPECTION TYPE</b> Routine	<b>FOLLOW-UP REQUIRED - TYPE</b> YES Administrative Follow-up	<b>FOLLOW-UP DATE</b> 07/28/2024	

### COMMENTS

- The well water report was observed and safe as of 7/12/2024.
- Discussed the new code changes such as background check policy, medicine administration course, and lifeguard staffing plan.
- Discussed with kitchen staff employee illness policy, handwashing, and cooling methods.
- Smoke detectors are not provided in the yurts by the waterfront. Provide proof to the department within 5 days (July 28, 2024) that new smoke detectors were purchased and installed. Proof of installation consists of photos of the following:
  1. Receipt for new detector
  2. Back of the smoke detector
  3. Location of the newly installed detector

### OBSERVED VIOLATIONS

For detailed code language regarding violations, go to:

[ATCP 78 - Recreational and Educational Camps](#), [WI Food Code](#) and [ATCP 75 Retail Food Establishments](#).

**Correct By** :08/02/2024

Priority Foundation

**Violation Type:** Violation

**Observation:** Agreement did not include confirmation of background checks for rental group leaders.

**Corrective Action:** Written agreement must include confirmation of rental group leaders background check was completed.

**Code Citation:** *ATCP 78.16 (1) (c) (9.) Background Check - Written Agreement*

**Correct By** :08/03/2024

Priority Foundation

**Violation Type:** Violation

**Observation:** Food establishment does not have procedures that address responding to vomiting or diarrheal events.

**Corrective Action:** Develop procedures for responding to vomiting and diarrheal events. Specifically actions that employees must take to minimize the spread of contamination.

**Code Citation:** 2-501.11 - CLEAN-UP OF VOMITING AND DIARRHEAL EVENTS

**Correct By** :08/02/2024

Priority Foundation

**Violation Type:** Violation

**Observation:** Agreement did not include confirmation of sexual abuse prevention training for rental group leaders.

**Corrective Action:** Written agreement must include confirmation of rental group leaders sexual abuse prevention training was completed.

**Code Citation:** ATCP 78.16 (1) (c) (10.) Sexual Abuse Prevention Training - Written Agreement

### **CRITICAL VIOLATION**

**Correct By** :07/23/2024

Priority - Critical

**Violation Type:** COS, Violation

**Observation:** It was observed that there was a dented can of peaches on the seal of the can.

**Corrective Action:** CORRECTED: Discarded unsafe, adulterated or not honestly presented food items.

**Code Citation:** 3-101.11 - SAFE UNADULTERATED AND HONESTLY PRESENTED

**Correct By** :08/02/2024

Priority Foundation

**Violation Type:** Violation

**Observation:** The top of the guard in the upper bunk bed in the Ojibwa cabin and the two Yurts measures less than 5 inches above the top of the upper bunk bed mattress.

**Corrective Action:** Provide a guard at least 5 inches above the top of the upper bunk bed mattress.

**Code Citation:** ATCP 78.21 (1) (c) (5.) (a.) Top Rail Distance Above Mattress - Bunk bed; platform tent; RV; construction

**Correct By** :08/02/2024

Priority Foundation

**Violation Type:** Violation

**Observation:** The bottom of the guard in the upper bunk bed in the Mohican measures greater than 3.5 inches above the upper bunk bed frame.

**Corrective Action:** Provide a guard no more than 3.5 inches above the top of the upper bunk bed frame.

**Code Citation:** ATCP 78.21 (1) (c) (5.) (b.) Bottom Rail Distance Above Mattress - Bunk bed; platform tent; RV; construction

**Correct By** :08/02/2024

Priority Foundation

**Violation Type:** Violation

**Observation:** Stairwell with three or more risers for the yurts by the waterfront does not have guards.

**Corrective Action:** Provide guard on stairwells with more than 3 risers that are part of a camp building structure.

**Code Citation:** ATCP 78.24 (2) (b) (1.) (a.) Guard Missing - Building code; handrails, guards, and stairs

**Correct By** :08/02/2024

Priority Foundation

**Violation Type:** Violation

**Observation:** The guard spacing on the yurts by the pool are missing on the deck. The guard rails must be 4 and 3/8 inches or less.

**Corrective Action:** Install guard that does not exceed 4 and 3/8 inches to prevent camper entrapment.

**Code Citation:** *ATCP 78.24 (2) (b) (3.) Guard Spacing* - Building code; handrails, guards, and stairs

**Correct By** :07/23/2024

Priority Foundation

**Violation Type:** COS, Violation

**Observation:** Improper cooling methods are observed for pancakes in the walk in cooler. A large amount of pancakes were observed in a plastic container.

**Corrective Action:** CORRECTED: The operator moved the pancakes to a metal sheet pan. Adjust methods or procedures to facilitate cooling as described in 3-501.15.

**Code Citation:** *3-501.15 (A)* - PROPER COOLING METHODS - CRITERIA

### **CRITICAL VIOLATION**

**Correct By** :07/28/2024

Priority - Critical

**Violation Type:** Violation

**Observation:** There are no smoke detectors in the yurts by the water front where campers sleep.

**Corrective Action:** Provide operational smoke detectors within manufacturer's lifespan in all sleeping rooms and required locations.

**Code Citation:** *ATCP 78.24 (8) (d) Smoke Detection* - Fire Prevention; notification, extinguisher, alarms, CO

**Correct By** :10/23/2024

Core

**Violation Type:** Violation

**Observation:** The exterior door going outside in the back of the kitchen is not tight-fitting. An air gap is present in the bottom right corner of the door.

**Corrective Action:** Provide a self-closing and tight fitting door to prevent the entrance of insects or rodents.

**Code Citation:** *6-202.15 (A) (3)* - INSECTS AND RODENTS - OUTER OPENINGS - SOLID, SELF-CLOSING AND TIGHT FITTING DOORS

**Correct By** :08/02/2024

Priority Foundation

**Violation Type:** Violation

**Observation:** The lifeguard and attendant staffing plan does not include the location of first aid kits.

**Corrective Action:** Indicate the location of all first aid kits in the aquatic activity area in the lifeguard and attendant staffing plan.

**Code Citation:** *ATCP 78.26 (3) (c) (2.) (e.) First Aid Kit Location* - Lifeguard and attendant staffing plan

**Correct By** :08/02/2024

Priority Foundation

**Violation Type:** Violation

**Observation:** The written emergency response plan does not address a camp's response to a communicable disease and foodborne illness outbreak.

**Corrective Action:** Include in the camp emergency response plan provisions for camp response to a communicable disease and foodborne illness outbreak, including reporting and notification to the health department.

**Code Citation:** *ATCP 78.26 (5) (b) (1.) (e.) Communicable Disease Response* - Camp security; emergency written plans

**Correct By** :10/23/2024

Core

**Violation Type:** Violation

**Observation:** Bungie cord is being used to hold water pitchers in place on the drying rack. Bungie cords are absorbent and not smooth.

**Corrective Action:** Provide non-food contact surfaces that are constructed of a corrosion resistant, nonabsorbent, and smooth material.

**Code Citation:** 4-101.19 - EQUIPMENT AND UTENSILS - NONFOOD CONTACT SURFACES - CONSTRUCTED

**CRITICAL VIOLATION**

**Correct By** :07/26/2024

Priority - Critical

**Violation Type:** Violation

**Observation:** For camps that last longer than 3 days, qualified health services staff delegated individual for administering medication has not completed the DPI medication administration online modules.

**Corrective Action:** Verify that delegated individuals administering medication complete the DPI medication administration online modules.

**Code Citation:** *ATCP 78.27 (4) (e) Delegated staff medication administration module - Medication administration*

**SUPPLEMENTAL INFORMATION**

Is there are a letter from EMS indicating they can respond within 15 minutes?: No

Initials of IN CAMP holder of first aid and CPR/AED certificate at time of inspection

Course completed for First Aid: LC American Red Cross

Course completed for CPR/AED: LC American Red Cross

Initials of WILDERNESS TRIPS holder of First aid and CPR/AED certificate at time of inspection

Course completed for First Aid: OC, WD, WG; Wilderness & Remote First Aid

Course completed for CPR/AED: OC, WD, WG Wilderness & Remote First Aid

Initials and Course completed for CPR/AED for any additional health staff member(s) IN CAMP

Course completed for CPR/AED: LC National EMS

Initials and Course of Lifeguard(s) serving during sessions at time of inspection

Lifeguards's Initials: JB, LC, OC

Course completed for First Aid: American Red Cross

Course completed for CPR/AED: American Red Cross

Course completed for Lifeguard: American Red Cross

**CERTIFIED FOOD PROTECTION MANAGER**

Name	Certificate Number	Expiration Date
Dianne Williams		10/03/2028

## EQUIPMENT TEMPERATURES

Type	Name	Equipment Temperature
Walk-In Cooler	Walk in Cooler	38 °F
Reach-In Cooler	Traulsen 4Dr RIC	40 °F
Walk-In Freezer	Walk in Freezer	0 °F
Reach-In Freezer	Standing freezer x2	0 °F
Reach-In Freezer	Retail ice cream freezer (Trading Post)	0 °F
Walk-In Cooler	Walk in Cooler	38 °F
Reach-In Freezer	Retail ice cream freezer (Trading Post)	0 °F
Walk-In Freezer	Walk in Freezer	0 °F
Reach-In Cooler	Traulsen 4Dr RIC	40 °F
Reach-In Freezer	Standing freezer x2	0 °F

## FOOD ITEM AND LOCATION

Food Item	Food State	Temperature
Chili WIC	Cold Holding	37.8 °F
Noodles WIC	Cold Holding	39.8 °F
Cooling pancakes (observed 11:30, placed in cooler at 10A)	Cooling	53.9 °F
Soy milk Traulsen RIC	Cold Holding	37.8 °F

## SANITIZING AND WAREWASHING

Machine Name	Sanitization Method	Thermo Label	PPM	Sanitizer Name	Sanitizer Type	Temperature	pH
High Temperature DishMachine	High temp	PASSED		High Temperature	High Temp		
3 Compartment Sink	Chemical/Manual		Not set up				

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**PERSON IN CHARGE - Danielle Polzin - Camp Director**



**SANITARIAN - Tyler Hischke**

**tyler.hischke@wisconsin.gov | (608) 772-9826**



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Wis. Stat. § 97.67  
 Subch. IV Wis. Admin. Code  
 ch. ATCP 78

## RECREATIONAL EDUCATIONAL CAMP INSPECTION REPORT

<b>ESTABLISHMENT NAME</b> HERZL CAMP		<b>LICENSE TYPE</b> Recreational/Educational Camp - Moderate	<b>LICENSE NUMBER</b> ATCP-005998
		<b>LICENSEE</b> HERZL CAMP ASSOCIATION ATCP-L15927	
<b>ESTABLISHMENT PHONE</b> (952) 927 - 4002	<b>ESTABLISHMENT EMAIL</b> gary@herzlcamp.org	<b>LICENSEE ADDRESS</b> 4330 CEDAR LAKE RD S ST. LOUIS PARK, MN 55416	
<b>INSPECTION DATE</b> 7/24/2024	<b>INSPECTION TYPE</b> Routine	<b>FOLLOW-UP REQUIRED - TYPE</b> NO	<b>FOLLOW-UP DATE</b>

### COMMENTS

This was a routine inspection with Gary Kibort being the person in charge. KA were the initials for the trained ropes course counselor.

### OBSERVED VIOLATIONS

For detailed code language regarding violations, go to:

[ATCP 78 - Recreational and Educational Camps](#), [WI Food Code](#) and [ATCP 75 Retail Food Establishments](#).

**Correct By** :07/24/2024

Core

**Violation Type:** COS

**Observation:** No handwashing signage provided at bakery handwashing sink.

**Corrective Action:** Provide handwashing signage at all handwashing sinks used by food employees.

**Code Citation:** 6-301.14 - HANDWASHING SIGNAGE



## SUPPLEMENTAL INFORMATION

Is there a letter from EMS indicating they can respond within 15 minutes?: Yes

### Initials of IN CAMP holder of first aid and CPR/AED certificate at time of inspection

Course completed for First Aid: MC

Course completed for CPR/AED: Red Cross

### Initials of WILDERNESS TRIPS holder of First aid and CPR/AED certificate at time of inspection

Course completed for First Aid:

Course completed for CPR/AED:

### Initials and Course completed for CPR/AED for any additional health staff member(s) IN CAMP

Course completed for CPR/AED: CD DSPS RN

### Initials and Course of Lifeguard(s) serving during sessions at time of inspection

Lifeguards's Initials: MC

Course completed for First Aid: Red Cross

Course completed for CPR/AED: PC

Course completed for Lifeguard: Red Cross

## CERTIFIED FOOD PROTECTION MANAGER

Name	Certificate Number	Expiration Date
Vincent Franz	25714716	05/26/2029

## EQUIPMENT TEMPERATURES

Type	Name	Equipment Temperature
Walk-In Cooler	WIC A	37.0 °F
Walk-In Cooler	WIC B	38.0 °F
Walk-In Freezer	WIF	0.0 °F

## FOOD ITEM AND LOCATION

Food Item	Food State	Temperature
WIC A - Cut Melon	Cold Holding	37.0 °F
WIC B-Whip Topping	Cold Holding	40.0 °F
Cook-Beef	Cook	170.0 °F

**SANITIZING AND WAREWASHING**

Machine Name	Sanitization Method	Thermo Label	PPM	Sanitizer Name	Sanitizer Type	Temperature	pH
Dishwasher	Mechanical	>160					
Sani Bucket	Chemical		400	Hillard	Quat		

*Your signature on this form acknowledges receipt of the inspection report, and is not an agreement with the findings. Signing this form is voluntary. Personally identifiable information you provide may be used for purposes other than that for which it was collected. Wis Stat. §15.04(1)(m). Any operator aggrieved by an order of this department under this chapter may request a hearing as provided in Wis. Stat. ch.227, if state licensed; or a local ordinance, licensed by an agent health department.*

GJK



**PERSON IN CHARGE - Gary Kibort - PIC**

**SANITARIAN - Alex Hintz  
Public Health Sanitarian-Advanced  
alex.hintz@wisconsin.gov | (608) 977-0242**



Wisconsin Department of Agriculture, Trade and Consumer Protection  
 Division of Food and Recreational Safety  
 PO Box 8911 Madison, WI 53708-8911  
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*Wis. Stat. § 97.67*  
*Subch. IV Wis. Admin. Code*  
*ch. ATCP 78*

## RECREATIONAL EDUCATIONAL CAMP INSPECTION REPORT

<b>ESTABLISHMENT NAME</b> BEAR PAW SCOUT CAMP		<b>LICENSE TYPE</b> Recreational/Educational Camp - Moderate		<b>LICENSE NUMBER</b> ATCP-001418
		<b>LICENSEE</b> BAY-LAKES COUNCIL BSA ATCP-L05532		
<b>ESTABLISHMENT PHONE</b> (715) 276 - 6167	<b>ESTABLISHMENT EMAIL</b> dan.connolly@scouting.org	<b>LICENSEE ADDRESS</b> PO BOX 267 APPLETON, WI 54912-0267		
<b>INSPECTION DATE</b> 7/9/2024	<b>INSPECTION TYPE</b> Routine	<b>FOLLOW-UP REQUIRED - TYPE</b> NO	<b>FOLLOW-UP DATE</b>	

### COMMENTS

- The well water report was observed and safe as of 4/29/2024.
- Discussed new code changes and requirements, and background checks.
  
- The food facility on site is contracted out to a third party. More information is being gathered due to previous records showing a separate license is required. Once information is gathered, sanitarian will inform operator.
  
- During the routine inspection, and meeting from October 11, 2023, the handwashing stations at the outhouses on site are discharging into the ground. This was noted as a repeat since it was noted in the previous code. There was no documentation provided about DSPS approval or Local County Zoning Department approval of this. If approval is provided it must be sent to the sanitarian. Any other response to these departments should be provided to the sanitarian as well.
  
- If the outhouses are being modified a plan review must be submitted to DSPS prior to updating these. Plan review documents will be sent to the operator and must reach out to DSPS prior to updating.
  
- This was a joint inspection with Jenna Ouradnik and Tyler Hischke.

## OBSERVED VIOLATIONS

For detailed code language regarding violations, go to:

[ATCP 78 - Recreational and Educational Camps](#), [WI Food Code](#) and [ATCP 75 Retail Food Establishments](#).

**Correct By** :07/19/2024

Priority Foundation

**Violation Type:** Violation

**Observation:** Food establishment does not have procedures that address responding to vomiting or diarrheal events.

**Corrective Action:** Develop procedures for responding to vomiting and diarrheal events. Specifically actions that employees must take to minimize the spread of contamination.

**Code Citation:** *2-501.11* - CLEAN-UP OF VOMITING AND DIARRHEAL EVENTS

**Correct By** :10/09/2024

Core

**Violation Type:** Violation

**Observation:** No handwashing signage provided at commissary and Trading Post handwashing sink.

**Corrective Action:** Provide handwashing signage at all handwashing sinks used by food employees.

**Code Citation:** *6-301.14* - HANDWASHING SIGNAGE

### CRITICAL VIOLATION

**Correct By** :07/12/2024

Priority - Critical

**Violation Type:** Repeat, Violation

**Observation:** Wastewater from handwashing sinks by outhouses throughout the camp is discharging to the ground. No paperwork from DSPS or Local County Zoning Department was provided during the inspection. Camp director did reach out and waiting response.

**Corrective Action:** Referral has been made to department of safety and professional services. Provide documentation the fixtures are connected to an approved sanitary system in compliance with the state plumbing code.

**Code Citation:** *ATCP 78.19 (1) Sewage/Plumbing Waste Discharges to Approved System* - Sewage/waste disposal system

### CRITICAL VIOLATION

**Correct By** :07/09/2024

Priority - Critical

**Violation Type:** COS, Violation

**Observation:** Chicken tenders was sitting on speed rack is cold held at 60-58°F.

**Corrective Action:** CORRECTED: Chicken tenders were cooked during the inspection to 165°F or greater. Maintain cold time/temperature control for safety food at or below 41°F. Discard unsafe food items.

**Code Citation:** *3-501.16 (A) (2) AND (B)* - TCS FOOD - COLD HOLDING

### CRITICAL VIOLATION

**Correct By** :07/09/2024

Priority - Critical

**Violation Type:** COS, Violation

**Observation:** Chemicals such as steramine tablets and other cleaning agents were stored above cutting boards and foil in the commissary.

**Corrective Action:** CORRECTED: Rearranged area so that toxic materials are stored below or away from food, equipment and single service items.

**Code Citation:** *7-201.11 (B)* - TOXIC SUBSTANCES - STORAGE

**Correct By** :07/19/2024

Priority Foundation

**Violation Type:** Violation

**Observation:** Persons living on the premises or a member of the camp's staff did not have the required background check. The camp did not have background check for camp staff that was ages 14-17 years old.

**Corrective Action:** Provide a means to account for proper camp staff screening including a criminal background check during the hiring process.

**Code Citation:** *ATCP 78.26 (1) (a) Applicable Individuals* - Background Check; frequency, policy

**Correct By** :10/09/2024

Core

**Violation Type:** Violation

**Observation:** Plywood shelves in the Trading Post where food is stored is absorbent and not smooth and easily cleanable.

**Corrective Action:** Provide non-food contact surfaces that are constructed of a corrosion resistant, nonabsorbent, and smooth material.

**Code Citation:** *4-101.19* - EQUIPMENT AND UTENSILS - NONFOOD CONTACT SURFACES - CONSTRUCTED

**Correct By** :07/19/2024

Priority Foundation

**Violation Type:** Violation

**Observation:** A chlorine test kit is not available for checking sanitizer concentrations in the Trading Post.

**Corrective Action:** Provide a test kit or other device for measuring the concentration of sanitizing solutions.

**Code Citation:** *4-302.14* - WAREWASHING - SANITIZING SOLUTION - TESTING DEVICES

### **CRITICAL VIOLATION**

**Correct By** :07/12/2024

Priority - Critical

**Violation Type:** Violation

**Observation:** For camps that last longer than 3 days, qualified health services staff delegated individual for administering medication has not completed the DPI medication administration online modules.

**Corrective Action:** Verify that delegated individuals administering medication complete the DPI medication administration online modules.

**Code Citation:** *ATCP 78.27 (4) (e) Delegated staff medication administration module* - Medication administration

**Correct By** :07/19/2024

Priority Foundation

**Violation Type:** Violation

**Observation:** The medication and treatment log does not include the name of the medication or treatment provided. The record that was observed stated "blue pill" given for the week of camp to camper.

**Corrective Action:** Document the name of the medication or treatment given on the medication administration form and treatment record.

**Code Citation:** *ATCP 78.27 (5) (c) (3.) Log Contains Name of Medication* - Health and treatment record requirements met

### **CRITICAL VIOLATION**

**Correct By** :07/12/2024

Priority - Critical

**Violation Type:** Violation

**Observation:** The medication and treatment record book has not been approved. Camp leaders or the person responsible for distributing medications are recording their group's medication on a single sheet of paper.

**Corrective Action:** Provide a bound book with preprinted page numbers for logging medication administered and treatment provided.

**Code Citation:** *ATCP 78.27 (5) (b) (1.) Bound book pre-printed pages* - Health and treatment record requirements met

**SUPPLEMENTAL INFORMATION**

Is there a letter from EMS indicating they can respond within 15 minutes?: Yes

Initials of IN CAMP holder of first aid and CPR/AED certificate at time of inspection

Course completed for First Aid: JS

Course completed for CPR/AED: Paramedic with Critical Care

Initials of WILDERNESS TRIPS holder of First aid and CPR/AED certificate at time of inspection

Course completed for First Aid:

Course completed for CPR/AED:

Initials and Course completed for CPR/AED for any additional health staff member(s) IN CAMP

Course completed for CPR/AED:

Initials and Course of Lifeguard(s) serving during sessions at time of inspection

Lifeguards's Initials: MT

Course completed for First Aid: American Red Cross

Course completed for CPR/AED: MT, DG, GB

Course completed for Lifeguard: American Red Cross

**CERTIFIED FOOD PROTECTION MANAGER**

Name	Certificate Number	Expiration Date
Herman Weaver	ServSafe	06/14/2025

## EQUIPMENT TEMPERATURES

<b>Type</b>	<b>Name</b>	<b>Equipment Temperature</b>
Walk-In Cooler	Walk-In Cooler Kitchen	36 °F
Walk-In Freezer	Walk-in Freezer Kitchen	0 °F
Reach-In Cooler	Commissary Turbo Air RIC	41 °F
Reach-In Freezer	Commissary Turbo Air RIF	0 °F
Walk-In Cooler	Walk-in Cooler Commissary	36 °F
Reach-In Freezer	Kenmore RIF Trading Post	0 °F
Chest Freezer	Chest Freezer Trading Post	0 °F
Chest Freezer	Retail Ice Cream Freezer Trading Post	0 °F
Reach-In Cooler	McCall RIC Milk Kitchen	40 °F
Walk-In Cooler	Walk-In Cooler Kitchen	36 °F
Chest Freezer	Chest Freezer Trading Post	0 °F
Chest Freezer	Retail Ice Cream Freezer Trading Post	0 °F
Walk-In Cooler	Walk-in Cooler Commissary	36 °F
Reach-In Cooler	McCall RIC Milk Kitchen	40 °F
Reach-In Freezer	Kenmore RIF Trading Post	0 °F
Reach-In Cooler	Commissary Turbo Air RIC	41 °F
Reach-In Freezer	Commissary Turbo Air RIF	0 °F
Walk-In Freezer	Walk-in Freezer Kitchen	0 °F

**FOOD ITEM AND LOCATION**

Food Item	Food State	Temperature
Potato Salad WIC	Cold Holding	39.4 °F
Chicken Sausage WIC	Cold Holding	40.1 °F
Sweet Potatoes Heat well	Hot Holding	171 °F
Chicken tenders speed rack	Cold Holding	60 °F
Milk McCall Milk RIC	Cold Holding	32.9 °F
Pepperoni Turbo Air RIC Commissary	Cold Holding	38.8 °F
Cooked Chicken tenders	Cook	190 °F
Milk Commissary WIC	Cold Holding	30.3 °F

**SANITIZING AND WAREWASHING**

Machine Name	Sanitization Method	Thermo Label	PPM	Sanitizer Name	Sanitizer Type	Temperature	pH
Hobart Dishwasher	High Temperature	PASSED		High temperature	High Temp		
Three compartment sink Kitchen	Chemical/Manual		200	Ecolab Multi-Quat	Quat		
Three compartment sink Trading Post	Chemical/Manual		not set up	Bleach	Chlorine		
Wiping Bucket	Chemical/Manual		400	Ecolab Multi-Quat	Quat		

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**PERSON IN CHARGE - Patrick Williquette - Camp Director**

**SANITARIAN - Tyler Hischke**

**tyler.hischke@wisconsin.gov | (608) 772-9826**





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Wis. Stat. § 97.67  
 Subch. IV Wis. Admin. Code  
 ch. ATCP 78

## RECREATIONAL EDUCATIONAL CAMP INSPECTION REPORT

<b>ESTABLISHMENT NAME</b>		<b>LICENSE TYPE</b>	<b>LICENSE NUMBER</b>
WOOD LAKE CAMP AND RETREAT CENTER		Recreational/Educational Camp - Moderate	ATCP-012624
		<b>LICENSEE</b>	
		WOOD LAKE CAMP AND RETREAT CENTER INC ATCP-L22853	
<b>ESTABLISHMENT PHONE</b>	<b>ESTABLISHMENT EMAIL</b>	<b>LICENSEE ADDRESS</b>	
715 689-2267	dan.hartke@woodlake.us	11850 ASSEMBLY RD GRANTSBURG, WI 54840	
<b>INSPECTION DATE</b>	<b>INSPECTION TYPE</b>	<b>FOLLOW-UP REQUIRED - TYPE</b>	<b>FOLLOW-UP DATE</b>
6/17/2024	Routine	NO	

### COMMENTS

This was a routine inspection with Corrie Slaight being the person in charge. Operator could not find the engineer report for the high ropes course. In order to use the high ropes course the report will need to be emailed to the sanitarian.

### OBSERVED VIOLATIONS

For detailed code language regarding violations, go to:

[ATCP 78 - Recreational and Educational Camps](#), [WI Food Code](#) and [ATCP 75 Retail Food Establishments](#).

**Correct By** :06/24/2024

Core

**Violation Type:** Violation

**Observation:** No handwashing signage provided at coffe shop handwashing sink.

**Corrective Action:** Provide handwashing signage at all handwashing sinks used by food employees.

**Code Citation:** 6-301.14 - HANDWASHING SIGNAGE

### **CRITICAL VIOLATION**

**Correct By** :06/24/2024

Priority - Critical

**Violation Type:** Violation

**Observation:** The camp could not provide the third party inspection documentation.

**Corrective Action:** Contact the third party inspection vendor to request a copy of the inspection reports for all high and low element challenge courses. The high and low element challenge course shall not be operated until written evidence of an inspection conducted by a qualified third party has been received or completed.

**Code Citation:** ATCP 78.26 (3) (b) (1.) (a.) Inspection Documentation - Challenge Course inspection

Priority Foundation

**Violation Type:** Violation

**Observation:** The lifeguard and attendant staffing plan does not include a diagram of all the aquatic areas used by campers.

**Corrective Action:** Include a diagram of all aquatic activity areas on the premises in the lifeguard and attendant staffing plan.

**Code Citation:** *ATCP 78.26 (3) (c) (2.) (a.) Diagram of waterfront - Lifeguard and attendant staffing plan*

## CRITICAL VIOLATION

Priority - Critical

**Violation Type:** Violation

**Observation:** A rescue pole was not available in the rescue boat.

**Corrective Action:** Provide a rescue pole that may also include a standard length oar or paddle in every rescue boat.

**Code Citation:** *ATCP 78.26 (3) (c) (12.) (b.) Rescue Boat Pole - Rescue boat & PFD available*

**Correct By :**06/24/2024

Priority Foundation

**Violation Type:** Violation

**Observation:** Establishment did not have quaternary ammonia test strips for determining sanitizer concentration or an irreversible measuring device for hot water dishwasher.

**Corrective Action:** Provide a quat test kit along with an irreversible temperature measuring device.

**Code Citation:** *4-302.14 - WAREWASHING - SANITIZING SOLUTION - TESTING DEVICES*

## SUPPLEMENTAL INFORMATION

Is there are a letter from EMS indicating they can respond within 15 minutes?: No

Initials of IN CAMP holder of first aid and CPR/AED certificate at time of inspection

Course completed for First Aid: LG

Course completed for CPR/AED: LG

Initials of WILDERNESS TRIPS holder of First aid and CPR/AED certificate at time of inspection

Course completed for First Aid: N/A

Course completed for CPR/AED: N/A

Initials and Course completed for CPR/AED for any additional health staff member(s) IN CAMP

Course completed for CPR/AED: LH

Initials and Course of Lifeguard(s) serving during sessions at time of inspection

Lifeguards's Initials: LG

Course completed for First Aid: Red Cross

Course completed for CPR/AED: Red Cross

Course completed for Lifeguard: Red Cross

**CERTIFIED FOOD PROTECTION MANAGER**

<b>Name</b>	<b>Certificate Number</b>	<b>Expiration Date</b>
Joshua Estep	22935250	11/28/2027

**EQUIPMENT TEMPERATURES**

<b>Type</b>	<b>Name</b>	<b>Equipment Temperature</b>
Reach-In Freezer	Coffee Shop Freezer	0.0 °F
Walk-In Freezer	WIF	0.0 °F
Walk-In Cooler	WIC	36.0 °F
Reach-In Cooler	Coffee Shop Counter Cooler	39.0 °F
Reach-In Cooler	Grista	38.0 °F

**FOOD ITEM AND LOCATION**

<b>Food Item</b>	<b>Food State</b>	<b>Temperature</b>
Grista-Milk	Cold Holding	40.0 °F
WIC-Watermelon	Cold Holding	40.0 °F
Coffee Shop Counter Cooler-Milk	Cold Holding	39.0 °F

**SANITIZING AND WAREWASHING**

<b>Machine Name</b>	<b>Sanitization Method</b>	<b>Thermo Label</b>	<b>PPM</b>	<b>Sanitizer Name</b>	<b>Sanitizer Type</b>	<b>Temperature</b>	<b>pH</b>
Sani Bucket	Chemical		400	Propower	Quat		
Dishwasher	Mechanical	> 160					

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**PERSON IN CHARGE - Corrie Slaight - PIC**



**SANITARIAN - Alex Hintz  
Public Health Sanitarian-Advanced  
alex.hintz@wisconsin.gov | (608) 977-0242**



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*Wis. Stat. § 97.67*  
*Subch. IV Wis. Admin. Code*  
*ch. ATCP 78*

## RECREATIONAL EDUCATIONAL CAMP INSPECTION REPORT

<b>ESTABLISHMENT NAME</b> CAMP BIRD YOUTH CENTER		<b>LICENSE TYPE</b> Recreational/Educational Camp - Moderate with Hospitality		<b>LICENSE NUMBER</b> ATCP-010239
		<b>LICENSEE</b> MARINETTE COUNTY PARKS DEPT ATCP-L10391		
<b>ESTABLISHMENT PHONE</b> (715) 732 - 7530	<b>ESTABLISHMENT EMAIL</b> ccolburn@marinettecounty.com	<b>LICENSEE ADDRESS</b> 1926 HALL AVE MARINETTE, WI 54143		
<b>INSPECTION DATE</b> 8/6/2024	<b>INSPECTION TYPE</b> Administrative Follow-Up	<b>FOLLOW-UP REQUIRED - TYPE</b> NO	<b>FOLLOW-UP DATE</b>	

### COMMENTS

- Due to the observation of the configuration of beds has less than 3 feet horizontally between beds was noted three times a re-inspection/administrative follow up occurred. Per discussion with supervisor Chris Hinz during the routine inspection pictures provided by the operator would be sufficient. The operator has provided proof that the beds are 3 feet horizontally between beds by showing pictures and provided markings on the floors for the user groups to ensure that they are three feet apart.

- This is an administrative follow up and incur a fee of \$200. No signature is required. No additional follow up is required.

### OBSERVED VIOLATIONS

For detailed code language regarding violations, go to:

[ATCP 78 - Recreational and Educational Camps](#), [WI Food Code](#) and [ATCP 75 Retail Food Establishments](#).

**SUPPLEMENTAL INFORMATION**

Is there a letter from EMS indicating they can respond within 15 minutes?:

Initials of IN CAMP holder of first aid and CPR/AED certificate at time of inspection

Course completed for First Aid:

Course completed for CPR/AED:

Initials of WILDERNESS TRIPS holder of First aid and CPR/AED certificate at time of inspection

Course completed for First Aid:

Course completed for CPR/AED:

Initials and Course completed for CPR/AED for any additional health staff member(s) IN CAMP

Course completed for CPR/AED:

Initials and Course of Lifeguard(s) serving during sessions at time of inspection

Lifeguards's Initials:

Course completed for First Aid:

Course completed for CPR/AED:

Course completed for Lifeguard:

**CERTIFIED FOOD PROTECTION MANAGER**

Name	Certificate Number	Expiration Date
------	--------------------	-----------------

## EQUIPMENT TEMPERATURES

Type	Name	Equipment Temperature
Chest Freezer	Chest Freezer (Snack Shack)	
Chest Freezer	Chest Freezer (Snack Shack)	
Reach-In Cooler	True 2Dr Reach in cooler	
Reach-In Cooler	True Reach in freezer	
Walk-In Cooler	Walk-in Cooler	
Reach-In Cooler	True Cooler (Snack Shack)	
Reach-In Cooler	True Cooler (Snack Shack)	
Reach-In Cooler	True 2Dr Reach in cooler	
Chest Freezer	Chest Freezer x4	
Reach-In Cooler	True Reach in freezer	
Chest Freezer	Chest Freezer x4	
Walk-In Cooler	Walk-in Cooler	

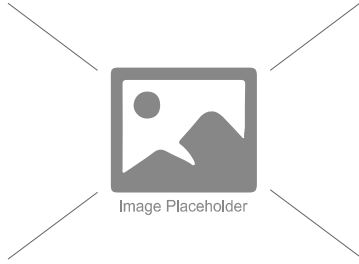
## FOOD ITEM AND LOCATION

Food Item	Food State	Temperature
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## SANITIZING AND WAREWASHING

Machine Name	Sanitization Method	Thermo Label	PPM	Sanitizer Name	Sanitizer Type	Temperature	pH
Hobart Dishwashing Machine	High temperature						

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A handwritten signature in black ink, appearing to read "Tyler Hischke".

**PERSON IN CHARGE - -**

**SANITARIAN - Tyler Hischke**

**tyler.hischke@wisconsin.gov | (608) 772-9826**





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Wis. Stat. § 97.67  
 Subch. IV Wis. Admin. Code  
 ch. ATCP 78

## RECREATIONAL EDUCATIONAL CAMP INSPECTION REPORT

<b>ESTABLISHMENT NAME</b> CAMP BIRD YOUTH CENTER		<b>LICENSE TYPE</b> Recreational/Educational Camp - Moderate with Hospitality	<b>LICENSE NUMBER</b> ATCP-010239
		<b>LICENSEE</b> MARINETTE COUNTY PARKS DEPT ATCP-L10391	
<b>ESTABLISHMENT PHONE</b> (715) 732 - 7530	<b>ESTABLISHMENT EMAIL</b> ccolburn@marinettecounty.com	<b>LICENSEE ADDRESS</b> 1926 HALL AVE MARINETTE, WI 54143	
<b>INSPECTION DATE</b> 7/24/2024	<b>INSPECTION TYPE</b> Routine	<b>FOLLOW-UP REQUIRED - TYPE</b> YES Administrative Follow-up	<b>FOLLOW-UP DATE</b> 08/07/2024

### COMMENTS

- The user group that was observed during the inspection was Camp Bird for Lutheran.
- The well water report was observed and safe as of 4/22/2024.
- Discussed new code changes and requirements including background checks, lifeguard staffing plans, and training documents.
- Discussed with the kitchen staff employee illness policy, handwashing, datemarking, and cooling methods.
- Due to the observation of beds not being 3 feet apart horizontally was noted during three consecutive inspections, a re-inspection will occur. Re-inspections are chargeable and incur a fee of \$200. This must be corrected by August 7, 2024. If the operator can provide proof showing that in Oaks #1 and Norway #1 that the beds are 3 feet apart prior to the re-inspection via a photo an administrative follow up will occur. Administrative follow ups incur a fee of \$200 as well.

### OBSERVED VIOLATIONS

For detailed code language regarding violations, go to:

[ATCP 78 - Recreational and Educational Camps](#), [WI Food Code](#) and [ATCP 75 Retail Food Establishments](#).

### **REPEAT**

**Correct By** :08/06/2024

Priority Foundation

**Violation Type:** Repeat

**Observation:** The configuration of beds has less than 3 feet horizontally between beds. Beds in the Oak 1 and Norway 1 measure 2ft and 2ft 6 inches horizontally between beds.

**Corrective Action:** Provide at least 3 feet horizontally between the sides of the beds for proper emergency egress.

**Code Citation:** *ATCP 78.21 (1) (a) (4.) Required Space Between Beds - Adequate sleeping quarters; capacity*

## CRITICAL VIOLATION

Priority - Critical

**Violation Type:** COS, Violation

**Observation:** Smoke detector in Oak Cabin #1 was expired.

**CORRECTED:** New smoke detector was provided during the inspection.

**Corrective Action:** Provide operational smoke detectors within manufacturer's lifespan in all sleeping rooms and required locations.

**Code Citation:** *ATCP 78.24 (8) (d) Smoke Detection* - Fire Prevention; notification, extinguisher, alarms, CO

**Correct By :** 08/03/2024

Priority Foundation

**Violation Type:** Violation

**Observation:** Challenge course inspection documentation does not include all of the elements inspected. The inspection was completed for the low element course, but documents are not provided during inspection.

**Corrective Action:** Provide documentation of all elements inspected by the third party inspection vendor.

**Code Citation:** *ATCP 78.26 (3) (b) (2.) (b.) Report Elements Inspected* - Challenge Course inspection

## CRITICAL VIOLATION

**Correct By :** 07/27/2024

Priority - Critical

**Violation Type:** Violation

**Observation:** Veggie trays in the customer self-service area is not protected from contamination. There are no guards in place to protect food from self service.

**Corrective Action:** Provide a food shield, food guard, or other effective means to protect food from potential consumer contamination.

**Code Citation:** *3-306.11* - FOOD CONTAMINATION PREVENTED BY CUSTOMERS IN FOOD DISPLAY

## REPEAT

**Correct By :** 10/24/2024

Core

**Violation Type:** Repeat

**Observation:** Swimming regulations are not conspicuously posted in the waterfront area.

**Corrective Action:** Conspicuously post the camp's swimming rules and restrictions and boating regulations.

**Code Citation:** *ATCP 78.26 (3) (c) (11.) Swim/Boat Rules Posted* - Lifeguard rescue equipment; duty; rules signage

**Correct By :** 08/03/2024

Priority Foundation

**Violation Type:** Violation

**Observation:** The written security plan does not address active threats and possible intruders on the camp premises. This was posted in the maintenance shed but not addressed in the written plan provided around the camp.

**Corrective Action:** Include a provision to address active threats and possible intruders on premises in the written camp security plan.

**Code Citation:** *ATCP 78.26 (5) (a) (3.) Active Threat Intruder Plan* - Camp security; emergency written plans

**Correct By :** 08/03/2024

Priority Foundation

**Violation Type:** Violation

**Observation:** The written emergency response plan does not address a camp's response to a communicable disease and foodborne illness outbreak.

**Corrective Action:** Include in the camp emergency response plan provisions for camp response to a communicable disease and foodborne illness outbreak, including reporting and notification to the health department.

**Code Citation:** *ATCP 78.26 (5) (b) (1.) (e.) Communicable Disease Response* - Camp security; emergency written plans

**CRITICAL VIOLATION**

**Correct By :** 07/27/2024

Priority - Critical

**Violation Type:** Violation

**Observation:** No written procedures or space for the temporary isolation of sick or injured campers and staff members.

**Corrective Action:** Provide written medical procedures and space for the temporary isolation of sick or injured campers and staff.

**Code Citation:** *ATCP 78.27 (1) (f) Health center procedure and space* - Health Center; phone; first aid; AED

**CRITICAL VIOLATION**

**Correct By :** 07/26/2024

Priority - Critical

**Violation Type:** Violation

**Observation:** It was observed during the inspection that over-the-counter medication, ibuprofen, came from a camper in a plastic baggie and not in the original container.

**Corrective Action:** Verify all OTC medications that are surrendered by campers to on-site health services staff are clearly labeled with the name of the camper.

**Code Citation:** *ATCP 78.27 (4) (c) (1.) OTC medication labeled* - Medications labeled and kept locked

**SUPPLEMENTAL INFORMATION**

Is there are a letter from EMS indicating they can respond within 15 minutes?: No

Initials of IN CAMP holder of first aid and CPR/AED certificate at time of inspection

Course completed for First Aid: SH, JF; Wisconsin RN

Course completed for CPR/AED: SH, JF; Wisconsin RN

Initials of WILDERNESS TRIPS holder of First aid and CPR/AED certificate at time of inspection

Course completed for First Aid:

Course completed for CPR/AED:

Initials and Course completed for CPR/AED for any additional health staff member(s) IN CAMP

Course completed for CPR/AED:

Initials and Course of Lifeguard(s) serving during sessions at time of inspection

Lifeguards's Initials: SVH, JS, DS

Course completed for First Aid: American Red Cross

Course completed for CPR/AED: American Red Cross

Course completed for Lifeguard: American Red Cross

**CERTIFIED FOOD PROTECTION MANAGER**

Name	Certificate Number	Expiration Date
Mark Stelter	ServSafe	07/12/2028
Justine Casey	ServSafe	07/01/2028

## EQUIPMENT TEMPERATURES

Type	Name	Equipment Temperature
Reach-In Cooler	True Reach in freezer	0 °F
Walk-In Cooler	Walk-in Cooler	40 °F
Reach-In Cooler	True 2Dr Reach in cooler	41 °F
Chest Freezer	Chest Freezer x4	0 °F
Reach-In Cooler	True Cooler (Snack Shack)	40 °F
Chest Freezer	Chest Freezer (Snack Shack)	0 °F
Chest Freezer	Chest Freezer x4	0 °F
Chest Freezer	Chest Freezer (Snack Shack)	0 °F
Reach-In Cooler	True Cooler (Snack Shack)	40 °F
Walk-In Cooler	Walk-in Cooler	40 °F
Reach-In Cooler	True 2Dr Reach in cooler	41 °F
Reach-In Cooler	True Reach in freezer	0 °F

## FOOD ITEM AND LOCATION

Food Item	Food State	Temperature
Milk True 2dr RIC	Cold Holding	38.4 °F
Sour Cream WIC	Cold Holding	43.0 °F
Pepperoni WIC	Cold Holding	39.2 °F
Ranch WIC	Cold Holding	41.2 °F

## SANITIZING AND WAREWASHING

Machine Name	Sanitization Method	Thermo Label	PPM	Sanitizer Name	Sanitizer Type	Temperature	pH
Hobart Dishwashing Machine	High temperature	PASSED		High Temp	High Temp		

*Your signature on this form acknowledges receipt of the inspection report, and is not an agreement with the findings. Signing this form is voluntary. Personally identifiable information you provide may be used for purposes other than that for which it was collected. Wis Stat. §15.04(1)(m). Any operator aggrieved by an order of this department under this chapter may request a hearing as provided in Wis. Stat. ch.227, if state licensed; or a local ordinance, licensed by an agent health department.*



**PERSON IN CHARGE - Phil Thibodeau - Caretaker**



**SANITARIAN - Tyler Hischke**

**tyler.hischke@wisconsin.gov | (608) 772-9826**



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Wis. Stat. § 97.67  
 Subch. IV Wis. Admin. Code  
 ch. ATCP 78

## RECREATIONAL EDUCATIONAL CAMP INSPECTION REPORT

<b>ESTABLISHMENT NAME</b> IMAGO DEI VILLAGE CAMP		<b>LICENSE TYPE</b> Recreational/Educational Camp - Moderate with Hospitality		<b>LICENSE NUMBER</b> ATCP-010261	
		<b>LICENSEE</b> CROSSWAYS LUTH CMP MINISTRIES INC ATCP-L10951			
<b>ESTABLISHMENT PHONE</b> (715) 823 - 2902	<b>ESTABLISHMENT EMAIL</b> amanda@crosswayscamps.org	<b>LICENSEE ADDRESS</b> W8160 CLOVERLEAF LAKE CLINTONVILLE, WI 54929			
<b>INSPECTION DATE</b> 7/22/2024	<b>INSPECTION TYPE</b> Re-Inspection	<b>FOLLOW-UP REQUIRED - TYPE</b> NO		<b>FOLLOW-UP DATE</b>	

### COMMENTS

The camp now has written arrangements (for campers and staff) by consulting physician for medical care. Previous inspection medication log listed one medicine as administered twice when it was a once-a-day medication, for the same camper another medication was missing, and for a separate camper the camper's administered medicine does not match the prescription bottle or the directions given by the parent (the parent's directions did not match the prescription bottle). This has been corrected by the development of a new form and policy in place that medication is required to be in original container or copy of the original bottle of medication. Policy is in place that the name on the prescription must match the camper's name. Policy in place for any variance of prescriptions dose on bottle and directions from parents, includes a written note from physician required and a review from the camps consulting physician.

This re-inspection was performed by Chris Hinz and Chad Nelson for the items under 50, 55, and 58 in the previous inspection report. This re-inspection will incur a fee of \$200.

### OBSERVED VIOLATIONS

For detailed code language regarding violations, go to:

[ATCP 78 - Recreational and Educational Camps](#), [WI Food Code](#) and [ATCP 75 Retail Food Establishments](#).

**SUPPLEMENTAL INFORMATION**

Is there a letter from EMS indicating they can respond within 15 minutes?:

Initials of IN CAMP holder of first aid and CPR/AED certificate at time of inspection

Course completed for First Aid:

Course completed for CPR/AED:

Initials of WILDERNESS TRIPS holder of First aid and CPR/AED certificate at time of inspection

Course completed for First Aid:

Course completed for CPR/AED:

Initials and Course completed for CPR/AED for any additional health staff member(s) IN CAMP

Course completed for CPR/AED:

Initials and Course of Lifeguard(s) serving during sessions at time of inspection

Lifeguards's Initials:

Course completed for First Aid:

Course completed for CPR/AED:

Course completed for Lifeguard:

**CERTIFIED FOOD PROTECTION MANAGER**

Name	Certificate Number	Expiration Date
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**EQUIPMENT TEMPERATURES**

Type	Name	Equipment Temperature
Walk-In Freezer	Walk in freezer	
Walk-In Cooler	Walk in cooler	

**FOOD ITEM AND LOCATION**

Food Item	Food State	Temperature
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**SANITIZING AND WAREWASHING**

Machine Name	Sanitization Method	Thermo Label	PPM	Sanitizer Name	Sanitizer Type	Temperature	pH
Propower	chemical						
3 compartment	chemical						

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**PERSON IN CHARGE - - Site Director**

**SANITARIAN - Chad Nelson  
Environmental Health Sanitarian-Entry  
Chad.Nelson@wisconsin.gov | (608) 640-7070**





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Wis. Stat. § 97.67  
 Subch. IV Wis. Admin. Code  
 ch. ATCP 78

## RECREATIONAL EDUCATIONAL CAMP INSPECTION REPORT

<b>ESTABLISHMENT NAME</b> NORTHERN GRACE YOUTH CAMP		<b>LICENSE TYPE</b> Recreational/Educational Camp - Moderate with Hospitality	<b>LICENSE NUMBER</b> ATCP-005840
		<b>LICENSEE</b> NORTHERN GRACE YOUTH CAMP ATCP-L16907	
<b>ESTABLISHMENT PHONE</b> (920) 785 - 4095	<b>ESTABLISHMENT EMAIL</b> camp@northerngraceyouthcamp.org	<b>LICENSEE ADDRESS</b> 14390 COUNTY ROAD VV GILLET, WI 54124	
<b>INSPECTION DATE</b> 7/18/2024	<b>INSPECTION TYPE</b> Routine	<b>FOLLOW-UP REQUIRED - TYPE</b> YES Administrative Follow-up	<b>FOLLOW-UP DATE</b> 07/21/2024

### COMMENTS

- The well water report was observed and safe as of 5/1/2024.
- Discussed the new code changes regarding lifeguard staffing, background check and medicine dispensing.
- With the kitchen staff discussed employee illness policy, handwashing, cooling, datemarking, and approved sources.
- Due to the S-hook observations was a priority violation a follow up is required to ensure that they are replaced, or crimped by July 21, 2024.

\*\* This was a joint inspection with Chad Nelson, Jenna Ouradnik, and Tyler Hischke.\*

### OBSERVED VIOLATIONS

For detailed code language regarding violations, go to:

[ATCP 78 - Recreational and Educational Camps](#), [WI Food Code](#) and [ATCP 75 Retail Food Establishments](#).

**Correct By** :07/28/2024

Priority Foundation

**Violation Type:** Violation

**Observation:** Agreement did not include confirmation of background checks for rental group leaders.

**Corrective Action:** Written agreement must include confirmation of rental group leaders background check was completed.

**Code Citation:** *ATCP 78.16 (1) (c) (9.) Background Check - Written Agreement*

**Correct By** :07/28/2024

Priority Foundation

**Violation Type:** Violation

**Observation:** Agreement did not include confirmation of sexual abuse prevention training for rental group leaders.

**Corrective Action:** Written agreement must include confirmation of rental group leaders sexual abuse prevention training was completed.

**Code Citation:** *ATCP 78.16 (1) (c) (10.) Sexual Abuse Prevention Training - Written Agreement*

**Correct By** :07/28/2024

Priority Foundation

**Violation Type:** Violation

**Observation:** A death, injury, or illness report was not submitted as required for an incident at the facility.

**Corrective Action:** Complete a death, injury, or illness report on the discussed incident immediately to comply with the requirement.

**Code Citation:** *ATCP 78.16 (1) (c) (12.) DII Reporting - Death, Injury, Illness Reporting*

**Correct By** :07/28/2024

Priority Foundation

**Violation Type:** Violation

**Observation:** Bunk beds in cabin 5 is less than 3 feet between the sides of the beds.

**Corrective Action:** Provide at least 6 feet horizontally between the heads of campers and ensure 3 feet spacing between the sides of the beds.

**Code Citation:** *ATCP 78.21 (1) (a) (5.) Bunk Bed Layout - Adequate sleeping quarters; capacity*

**Correct By** :07/28/2024

Priority Foundation

**Violation Type:** COS, Violation

**Observation:** Improper cooling methods are observed for sausage in the walk-in cooler. The sausages were covered with plastic.

**Corrective Action:** CORRECTED: Removed plastic covering. Adjust methods or procedures to facilitate cooling as described in 3-501.15.

**Code Citation:** *3-501.15 (A) - PROPER COOLING METHODS - CRITERIA*

**Correct By** :10/18/2024

Core

**Violation Type:** Violation

**Observation:** Employee noted working in food preparation/cooking area without a hair restraint.

**Corrective Action:** Provide employees working in food preparation and cooking areas with effective hair restraint (hat, hair net, beard restraint, etc.).

**Code Citation:** *2-402.11 - PERSONAL CLEANLINESS - HAIR RESTRAINTS*

**Correct By** :07/28/2024

Priority Foundation

**Violation Type:** Violation

**Observation:** The lifeguard and attendant staffing plan did not include hours of operation for the boating hours.

**Corrective Action:** Indicate the hours of operation within the the lifeguard and attendant staffing plan.

**Code Citation:** *ATCP 78.26 (3) (c) (2.) (c.) Hours of operation - Lifeguard and attendant staffing plan*

**Correct By** :10/18/2024

Core

**Violation Type:** Violation

**Observation:** The floors in the canteen are not sealed and bare concrete causing the floor to be absorbent and not easily cleanable.

**Corrective Action:** Provide floors, walls, and ceilings that are designed, constructed, and installed so they are smooth and easily cleanable.

**Code Citation:** *6-201.11 - FLOORS, WALLS AND CEILINGS - CLEANABILITY*

**Correct By :** 10/18/2024

Core

**Violation Type:** Violation

**Observation:** Lights located in the canteen are not shatter resistant or shielded.

**Corrective Action:** Provide shielded, coated, or otherwise shatter resistant light bulbs.

**Code Citation:** 6-202.11 - LIGHT BULBS - PROTECTIVE SHIELDING

### **CRITICAL VIOLATION**

**Correct By :** 07/21/2024

Priority - Critical

**Violation Type:** Violation

**Observation:** By the basketball court the playground rings the S-hooks are not maintained closed.

**Corrective Action:** Replace or repair all open S- hooks on playground equipment to prevent camper injury.

**Code Citation:** *ATCP 78.30 (2) (a) (1.) "S" hooks* - Playground Equipment

**Correct By :** 07/28/2024

Priority Foundation

**Violation Type:** Violation

**Observation:** Playground equipment by the chapel is not in good repair. Some of the boards on the playhouse are loose and can cause a fall hazard.

**Corrective Action:** Repair playground equipment to prevent camper injury.

**Code Citation:** *ATCP 78.30 (1) (b) Overall Good Repair* - Playground Equipment

### **SUPPLEMENTAL INFORMATION**

Is there are a letter from EMS indicating they can respond within 15 minutes?: Yes

Initials of IN CAMP holder of first aid and CPR/AED certificate at time of inspection

Course completed for First Aid: SE, PP; WI RN

Course completed for CPR/AED: SE, PP WI RN

Initials of WILDERNESS TRIPS holder of First aid and CPR/AED certificate at time of inspection

Course completed for First Aid:

Course completed for CPR/AED:

Initials and Course completed for CPR/AED for any additional health staff member(s) IN CAMP

Course completed for CPR/AED:

Initials and Course of Lifeguard(s) serving during sessions at time of inspection

Lifeguards's Initials: RA, LS

Course completed for First Aid: American Red Cross

Course completed for CPR/AED: American Red Cross

Course completed for Lifeguard: American Red Cross

**CERTIFIED FOOD PROTECTION MANAGER**

Name	Certificate Number	Expiration Date
David Green		06/08/2028

**EQUIPMENT TEMPERATURES**

Type	Name	Equipment Temperature
Walk-In Cooler	Walk-in Cooler	40 °F
Reach-In Cooler	Argus Reach-in Cooler	38 °F
Reach-In Cooler	Avantco Milk Cooler	36 °F
Chest Freezer	Chest Freezer BASEMENT	0 °F
Reach-In Freezer	Standing Freezer x2 BASEMENT	0 °F
Walk-In Cooler	Walk-in Cooler	40 °F
Reach-In Cooler	Argus Reach-in Cooler	38 °F
Reach-In Cooler	Avantco Milk Cooler	36 °F
Chest Freezer	Chest Freezer BASEMENT	0 °F
Reach-In Freezer	Standing Freezer x2 BASEMENT	0 °F

**FOOD ITEM AND LOCATION**

Food Item	Food State	Temperature
Cooked Pasta for HH	Cook	168.0 °F
Cooling Sausage (breakfast finished 9:30 checked at 11:30)	Cooling	55.0 °F
Cooling Sausage (breakfast finished 9:30 checked at 12:05)	Cooling	53.0 °F
Cooling Sausage (breakfast finished 9:30 checked at 12:30)	Cooling	39.0 °F
Taco Meat Argus RIC	Cold Holding	39.2 °F
Nacho Cheese WIC	Cold Holding	38.0 °F
Broccoli WIC	Cold Holding	37.0 °F
Milk Avantco RIC	Cold Holding	36.0 °F

**SANITIZING AND WAREWASHING**

Machine Name	Sanitization Method	Thermo Label	PPM	Sanitizer Name	Sanitizer Type	Temperature	pH
Dish Washer	Mechanical/Chemical		50	Lo Temp	Chlorine		

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**PERSON IN CHARGE - Dave Green - Camp Director**



**SANITARIAN - Tyler Hischke**

**tyler.hischke@wisconsin.gov | (608) 772-9826**



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*Wis. Stat. § 97.67*  
*Subch. IV Wis. Admin. Code*  
*ch. ATCP 78*

## RECREATIONAL EDUCATIONAL CAMP INSPECTION REPORT

<b>ESTABLISHMENT NAME</b> NORTHERN GRACE YOUTH CAMP		<b>LICENSE TYPE</b> Recreational/Educational Camp - Moderate with Hospitality		<b>LICENSE NUMBER</b> ATCP-005840
		<b>LICENSEE</b> NORTHERN GRACE YOUTH CAMP ATCP-L16907		
<b>ESTABLISHMENT PHONE</b> (920) 785 - 4095	<b>ESTABLISHMENT EMAIL</b> camp@northerngraceyouthcamp.org	<b>LICENSEE ADDRESS</b> 14390 COUNTY ROAD VV GILLET, WI 54124		
<b>INSPECTION DATE</b> 7/18/2024	<b>INSPECTION TYPE</b> Administrative Follow-Up	<b>FOLLOW-UP REQUIRED - TYPE</b> NO	<b>FOLLOW-UP DATE</b>	

### COMMENTS

- The facility has provided proof that the S-hooks were corrected.
- This is an administrative follow up and no signature is required.

### OBSERVED VIOLATIONS

For detailed code language regarding violations, go to:

[ATCP 78 - Recreational and Educational Camps](#), [WI Food Code](#) and [ATCP 75 Retail Food Establishments](#).

**SUPPLEMENTAL INFORMATION**

Is there a letter from EMS indicating they can respond within 15 minutes?:

Initials of IN CAMP holder of first aid and CPR/AED certificate at time of inspection

Course completed for First Aid:

Course completed for CPR/AED:

Initials of WILDERNESS TRIPS holder of First aid and CPR/AED certificate at time of inspection

Course completed for First Aid:

Course completed for CPR/AED:

Initials and Course completed for CPR/AED for any additional health staff member(s) IN CAMP

Course completed for CPR/AED:

Initials and Course of Lifeguard(s) serving during sessions at time of inspection

Lifeguards's Initials:

Course completed for First Aid:

Course completed for CPR/AED:

Course completed for Lifeguard:

**CERTIFIED FOOD PROTECTION MANAGER**

Name	Certificate Number	Expiration Date
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**EQUIPMENT TEMPERATURES**

Type	Name	Equipment Temperature
Reach-In Cooler	Argus Reach-in Cooler	
Walk-In Cooler	Walk-in Cooler	
Chest Freezer	Chest Freezer BASEMENT	
Reach-In Cooler	Argus Reach-in Cooler	
Reach-In Cooler	Avantco Milk Cooler	
Reach-In Freezer	Standing Freezer x2 BASEMENT	
Reach-In Cooler	Avantco Milk Cooler	
Walk-In Cooler	Walk-in Cooler	
Chest Freezer	Chest Freezer BASEMENT	
Reach-In Freezer	Standing Freezer x2 BASEMENT	

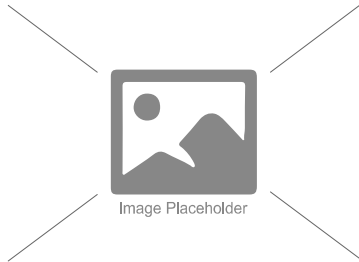
**FOOD ITEM AND LOCATION**

Food Item	Food State	Temperature
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**SANITIZING AND WAREWASHING**

Machine Name	Sanitization Method	Thermo Label	PPM	Sanitizer Name	Sanitizer Type	Temperature	pH
Dish Washer	Mechanical/Chemical						

*Your signature on this form acknowledges receipt of the inspection report, and is not an agreement with the findings. Signing this form is voluntary. Personally identifiable information you provide may be used for purposes other than that for which it was collected. Wis Stat. §15.04(1)(m). Any operator aggrieved by an order of this department under this chapter may request a hearing as provided in Wis. Stat. ch.227, if state licensed; or a local ordinance, licensed by an agent health department.*



PERSON IN CHARGE - -

SANITARIAN - Tyler Hischke

tyler.hischke@wisconsin.gov | (608) 772-9826





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*Wis. Stat. § 97.67*  
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*ch. ATCP 78*

## RECREATIONAL EDUCATIONAL CAMP INSPECTION REPORT

<b>ESTABLISHMENT NAME</b> LAKE LUNDGREN BIBLE CAMP		<b>LICENSE TYPE</b> Recreational/Educational Camp - Moderate with Hospitality		<b>LICENSE NUMBER</b> ATCP-010238	
		<b>LICENSEE</b> LAKE LUNDGREN BIBLE CAMP INC ATCP-L16986			
<b>ESTABLISHMENT PHONE</b> (715) 324 - 5457		<b>ESTABLISHMENT EMAIL</b> campdirector@llbc.org		<b>LICENSEE ADDRESS</b> N18250 LAKE LN PEMBINE, WI 54156	
<b>INSPECTION DATE</b> 7/16/2024		<b>INSPECTION TYPE</b> Routine		<b>FOLLOW-UP REQUIRED - TYPE</b> NO	
				<b>FOLLOW-UP DATE</b>	

### COMMENTS

- Well water report was observed and safe as of 4/17/2024, and 6/11/2024 for the multiple wells on the property.
- Discussed new code changes and requirements, such as background checks, and lifeguard staffing.
- The operator was trying to acquire information about freeze drying foods from kitchen for wilderness trips. A HACCP plan would be required for foods that require refrigeration. HACCP plan material is being provided with the inspection report.
- Wilderness trip provisions including sanitary drinking water, food, bathroom arrangements and medication dispensing were discussed.
- For new buildings that are added a plan review must be submitted. Plan review documents will be provided as well.

\*\*This was a joint inspection with Jenna Ouradnik and Tyler Hischke.\*\*

## OBSERVED VIOLATIONS

For detailed code language regarding violations, go to:

[ATCP 78 - Recreational and Educational Camps, WI Food Code](#) and [ATCP 75 Retail Food Establishments](#).

### **CRITICAL VIOLATION**

**Correct By** :07/16/2024

Priority - Critical

**Violation Type:** COS

**Observation:** Eggs were stored over bread in the walk-in cooler.

**Corrective Action:** CORRECTED: Reorganized food storage so that ready-to-eat foods are stored above raw animal food and raw vegetables. Discard ready-to-eat foods that show evidence of contamination.

**Code Citation:** 3-302.11 (A) (1) - PACKAGED AND UNPACKAGED FOOD - RAW OVER RTE-FOODS

**Correct By** :07/26/2024

Priority Foundation

**Violation Type:** Violation

**Observation:** End to end bed configurations has less than 6 feet between the head's of campers. The heads of campers located less than 6 feet between heads.

**Corrective Action:** Provide at least 6 feet horizontally between the heads of campers and ensure 3 feet spacing between the sides of the beds.

**Code Citation:** ATCP 78.21 (1) (a) (5.) Bunk Bed Layout - Adequate sleeping quarters; capacity

### **CRITICAL VIOLATION**

**Correct By** :07/16/2024

Priority - Critical

**Violation Type:** COS, Violation

**Observation:** House made cream cheese mix, cheese spread, and whipped toppings has exceeded its date mark in the walk-in cooler.

**Corrective Action:** CORRECTED: Discarded ready-to-eat Time/Temperature Control for Safety Food requiring a date mark that has exceeded the discard date or has not been provided with a date mark.

**Code Citation:** 3-501.18 (A) - DATE MARKING - DISPOSITION

### **CRITICAL VIOLATION**

**Correct By** :07/16/2024

Priority - Critical

**Violation Type:** COS, Violation

**Observation:** Sanitizer spray is stored over ice machine.

**Corrective Action:** CORRECTED: Rearranged area so that toxic materials are stored below or away from food, equipment and single service items.

**Code Citation:** 7-201.11 (B) - TOXIC SUBSTANCES - STORAGE

### **CRITICAL VIOLATION**

**Correct By** :07/16/2024

Priority - Critical

**Violation Type:** COS, Violation

**Observation:** Smoke detector in the Sugar Maple cabin is expired.

**Corrective Action:** CORRECTED: Provided operational smoke detectors within manufacturer's lifespan in all sleeping rooms and required locations.

**Code Citation:** ATCP 78.24 (8) (d) Smoke Detection - Fire Prevention; notification, extinguisher, alarms, CO

**Correct By** :07/26/2024

Priority Foundation

**Violation Type:** Violation

**Observation:** No policy is available for addressing the employment selection of camp staff after a background check that reveals a record of violent crime against a person or animal, crimes against nature where children were affected, any crime involving a child as a victim, or possession or facilitation of child pornography.

**Corrective Action:** Provide a policy that addresses the employment selection of a person after a background check reveals a record of violent crime against a person or animal, crimes against nature where children were affected, any crime involving a child as a victim, or possession or facilitation of child pornography.

**Code Citation:** *ATCP 78.26 (1) (c) (1.) (a.) Background Check Threshold Policy* - Background Check; frequency, policy

**Correct By** :07/26/2024

Priority Foundation

**Violation Type:** Violation

**Observation:** Persons ages 17-14 living on the premises or a member of the camp's staff did not have the required background check.

**Corrective Action:** Provide a means to account for proper camp staff screening including a criminal background check during the hiring process.

**Code Citation:** *ATCP 78.26 (1) (a) Applicable Individuals* - Background Check; frequency, policy

### **CRITICAL VIOLATION**

**Correct By** :07/19/2024

Priority - Critical

**Violation Type:** Violation

**Observation:** The camp could not provide the third party inspection documentation. An inspection was provided from a structural engineer but document was not provided.

**Corrective Action:** Contact the third party inspection vendor to request a copy of the inspection reports for all high and low element challenge courses. The high and low element challenge course shall not be operated until written evidence of an inspection conducted by a qualified third party has been received or completed.

**Code Citation:** *ATCP 78.26 (3) (b) (1.) (a.) Inspection Documentation* - Challenge Course inspection

**Correct By** :10/16/2024

Core

**Violation Type:** Violation

**Observation:** Food during outdoor cooking operations is subject to potential contamination by having no overhead protection.

**Corrective Action:** Remove food from this location or provide alternate methods to protect food from contamination.

**Code Citation:** *3-305.14 - FOOD CONTAMINATION - FOOD PREPARATION*

**Correct By** :07/26/2024

Priority Foundation

**Violation Type:** Violation

**Observation:** The camp does not have available an off-site food safety plan.

**Corrective Action:** Develop an off-site food safety plan used for primitive camping trips.

**Code Citation:** *ATCP 78.32 (5) Off Site Food Safety Plan* - Off site food safety plan

**SUPPLEMENTAL INFORMATION**

Is there a letter from EMS indicating they can respond within 15 minutes?: No

Initials of IN CAMP holder of first aid and CPR/AED certificate at time of inspection

Course completed for First Aid: MD  
Course completed for CPR/AED: WI RN

Initials of WILDERNESS TRIPS holder of First aid and CPR/AED certificate at time of inspection

Course completed for First Aid: JS  
Course completed for CPR/AED: Wilderness & First Aid

Initials and Course completed for CPR/AED for any additional health staff member(s) IN CAMP

Course completed for CPR/AED:

Initials and Course of Lifeguard(s) serving during sessions at time of inspection

Lifeguards's Initials: KD, EH, KS  
Course completed for First Aid: American Red Cross  
Course completed for CPR/AED: American Red Cross  
Course completed for Lifeguard: American Red Cross

**CERTIFIED FOOD PROTECTION MANAGER**

Name	Certificate Number	Expiration Date
Troy Meissner		06/22/2025

## EQUIPMENT TEMPERATURES

Type	Name	Equipment Temperature
Walk-In Cooler	Walk-in Cooler	39 °F
Walk-In Freezer	Walk-in Freezer	0 °F
Reach-In Cooler	True Double Door RIC	38 °F
Reach-In Freezer	Single Door Freezer CANTEEN	0 °F
Reach-In Freezer	Avantco Double Door Counter Freezer	0 °F
Walk-In Cooler	Walk-in Cooler	39 °F
Reach-In Cooler	True Double Door RIC	38 °F
Reach-In Freezer	Single Door Freezer CANTEEN	0 °F
Walk-In Freezer	Walk-in Freezer	0 °F
Reach-In Freezer	Avantco Double Door Counter Freezer	0 °F

## FOOD ITEM AND LOCATION

Food Item	Food State	Temperature
Rice WIC	Cold Holding	39.6 °F
Beans WIC	Cold Holding	38.3 °F
Enchilada WIC	Cold Holding	37.6 °F
Chocolate Frosting Turbo Air	Cold Holding	37.8 °F
Butter Turbo Air	Cold Holding	37.6 °F
Cooked Turkey	Cook	196.6 °F

## SANITIZING AND WAREWASHING

Machine Name	Sanitization Method	Thermo Label	PPM	Sanitizer Name	Sanitizer Type	Temperature	pH
Small Jackson Dishwasher	High Temp	PASSED		High Temperature	High Temp		
Three compartment sink CANTEEN	Manual/			Not Provided Currently			
Large Jackson Dishwasher	High Temp	PASSED		High Temperature	High Temp		

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**PERSON IN CHARGE - Troy Meissner - Camp Director**



**SANITARIAN - Tyler Hischke**

**tyler.hischke@wisconsin.gov | (608) 772-9826**



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Wis. Stat. § 97.67  
 Subch. IV Wis. Admin. Code  
 ch. ATCP 78

## RECREATIONAL EDUCATIONAL CAMP INSPECTION REPORT

<b>ESTABLISHMENT NAME</b> LUTHER POINT BIBLE CAMP		<b>LICENSE TYPE</b> Recreational/Educational Camp - Moderate with Hospitality		<b>LICENSE NUMBER</b> ATCP-001582	
		<b>LICENSEE</b> LUTHERAN BIBLE CAMP ASSOCIATION ATCP-L10966			
<b>ESTABLISHMENT PHONE</b> 715 689-2347		<b>ESTABLISHMENT EMAIL</b> sam@lutherpoint.org		<b>LICENSEE ADDRESS</b> 11525 LUTHER POINT RD GRANTSBURG, WI 54840	
<b>INSPECTION DATE</b> 6/24/2024		<b>INSPECTION TYPE</b> Routine		<b>FOLLOW-UP REQUIRED - TYPE</b> NO	
				<b>FOLLOW-UP DATE</b>	

### COMMENTS

This was a routine inspection with Sam Campeau being the person in charge. Water was tested and passed. License will be going from a moderate to simple.

### OBSERVED VIOLATIONS

For detailed code language regarding violations, go to:

[ATCP 78 - Recreational and Educational Camps](#), [WI Food Code](#) and [ATCP 75 Retail Food Establishments](#).

Core

**Violation Type:** Violation

**Observation:** Handwashing sink is not non-hand operated.

**Corrective Action:** Employee handwashing sinks shall be non hand operated. Knobs need to be switched to paddles.

**Code Citation:** 5-202.12 (C) - HANDWASHING SINKS, INSTALLATION - NON-HAND OPERATED

Priority Foundation

**Violation Type:** Violation

**Observation:** The lifeguard and attendant staffing plan does not include a diagram of all the aquatic areas used by campers.

**Corrective Action:** Include a diagram of all aquatic activity areas on the premises in the lifeguard and attendant staffing plan.

**Code Citation:** ATCP 78.26 (3) (c) (2.) (a.) Diagram of waterfront - Lifeguard and attendant staffing plan

**SUPPLEMENTAL INFORMATION**

Is there a letter from EMS indicating they can respond within 15 minutes?: Yes

Initials of IN CAMP holder of first aid and CPR/AED certificate at time of inspection

Course completed for First Aid: AA

Course completed for CPR/AED: AA

Initials of WILDERNESS TRIPS holder of First aid and CPR/AED certificate at time of inspection

Course completed for First Aid:

Course completed for CPR/AED:

Initials and Course completed for CPR/AED for any additional health staff member(s) IN CAMP

Course completed for CPR/AED: FA,BH,KW

Initials and Course of Lifeguard(s) serving during sessions at time of inspection

Lifeguards's Initials: EE, FA, BH, KW

Course completed for First Aid: Red Cross

Course completed for CPR/AED: Red Cross

Course completed for Lifeguard: Red Cross

**CERTIFIED FOOD PROTECTION MANAGER**

Name	Certificate Number	Expiration Date
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**EQUIPMENT TEMPERATURES**

Type	Name	Equipment Temperature
Walk-In Freezer	WIF	0.0 °F
Walk-In Cooler	WIC	30.0 °F
Other	Milk Dispenser	33.0 °F

**FOOD ITEM AND LOCATION**

Food Item	Food State	Temperature
WIC-Nuggets	Cold Holding	39.0 °F
Milk Dispenser-Milk	Cold Holding	36.0 °F



**SANITIZING AND WAREWASHING**

Machine Name	Sanitization Method	Thermo Label	PPM	Sanitizer Name	Sanitizer Type	Temperature	pH
Sani Bucket	Chemical		400	Propower	Quat		
Dishwasher	Chemical		50	Intercon	Chlorine		

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**PERSON IN CHARGE - Sam Campeau - PIC**



**SANITARIAN - Alex Hintz  
Public Health Sanitarian-Advanced  
alex.hintz@wisconsin.gov | (608) 977-0242**



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Wis. Stat. § 97.67  
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 ch. ATCP 78

## RECREATIONAL EDUCATIONAL CAMP INSPECTION REPORT

<b>ESTABLISHMENT NAME</b> TRINITY WOODS CATHOLIC CAMP & RETREAT CENTER		<b>LICENSE TYPE</b> Recreational/Educational Camp - Moderate with Hospitality	<b>LICENSE NUMBER</b> ATCP-014044
<b>ESTABLISHMENT ADDRESS</b>		<b>LICENSEE</b> MN CATHOLIC YOUTH PARTNERSHIP ATCP-L23976	
<b>ESTABLISHMENT PHONE</b> (612) 695 - 0720	<b>ESTABLISHMENT EMAIL</b> timhealy15@gmail.com	<b>LICENSEE ADDRESS</b> 1500 TAMARACK DR LONG LAKE, MN 55356	
<b>INSPECTION DATE</b> 2/8/2024	<b>INSPECTION TYPE</b> Pre-Inspection	<b>FOLLOW-UP REQUIRED - TYPE</b> YES	<b>FOLLOW-UP DATE</b> 05/09/2024

*The inspection report formatting has been updated and is not a facsimile of the original report. The information (data) contained herein remains unchanged. The Department of Agriculture, Trade and Consumer Protection (DATCP) has made a reasonable effort to ensure that the accompanying information is up-to-date, accurate, complete, and comprehensive at the time of disclosure. The inspection report is a true and accurate representation of the data on file at DATCP.*

### COMMENTS

License that was applied for was a Rec Ed Camp Moderate with Hospitality. The correct license category for this establishment as calculated by assessment is a Rec Ed Camp Complex with Hospitality. \$1905 was paid for the moderate license-- \$2145 is required for the complex. An additional \$240 must be paid for the remainder of the license fee before the license can be released--license to be withheld until processed. License (once processed) will be released conditionally until a Certified Food Protection Manager is provided--see attached.

For more detailed information concerning staffing plans and requirements and any other info, please contact: Stephanie Sticka, REHS (She/Her/Hers)  
 Recreational Technical Specialist-Rec Ed Camps  
 WI Department of Agriculture, Trade and Consumer Protection  
 608-400-2422 (Call or Text)  
 Stephanie.Sticka@wisconsin.gov

CO detectors are expired in cabins 1 & 2. License to be withheld until working CO detectors are provided. Replace and send proof of replacement (email or text picture of replacement detector showing that the detector is less than 10 years old) to Ed Newbury email edward.newbury@wisconsin.gov or text 7156519833 so license can be released.

Most topics related to child rec ed activities are not in place yet and will be

rechecked before offered in June including health, high risk, low risk, staffing

safe water results 7-20-2023

Facility will not be set up for children's activities until June 24. Adult lodging only-until Pre-inspected is completed

Discussed all swimming activity requirements, infirmary requirements, staff training and certification requirements.

Discussed handwashing procedures and requirements at length, temp monitoring, thermometer calibration, discussed employee illness policy and restriction criteria.

## **OBSERVED VIOLATIONS**

For detailed code language regarding violations, go to:

[ATCP 78 - Recreational and Educational Camps, WI Food Code](#) and [ATCP 75 Retail Food Establishments](#).

**Correct By** :05/08/2024

Core

**Violation Type:** Violation

**Observation:** There is no approved or current certified food manager for this establishment.

**Corrective Action:** Provide an approved certified food protection manager in the food establishment within 90 days Correct By: 08-May-2024

**Code Citation:** 12-201.11 (A) (1) - CERTIFIED FOOD MANAGER – REQUIREMENT - FOOD ESTABLISHMENTS

### **CRITICAL VIOLATION**

**Correct By** :02/08/2024

Priority - Critical

**Violation Type:** Violation

**Observation:** Cooked duck in 2door upright has exceeded its date mark by 5 days

**Corrective Action:** Discard ready-to-eat Time/Temperature Control for Safety Food requiring a date mark that has exceeded the discard date or has not been provided with a date mark. Discarded during Correct By: 08-Feb-2024

**Code Citation:** 3-501.18 (A) - DATE MARKING - DISPOSITION

### **CRITICAL VIOLATION**

**Correct By** :02/08/2024

Priority - Critical

**Violation Type:** Violation

**Observation:** Carbon monoxide detector in cabins are missing.

**Corrective Action:** Provide operational carbon monoxide detectors within manufacturer's lifespan in all sleeping rooms and required locations with fuel burning appliances. Correct By: 08-Feb-2024

**Code Citation:** ATCP 78.24 (9) (a) Carbon monoxide detection - Fire Prevention; notification, extinguisher, alarms, CO

**Correct By** :02/08/2024

Core

**Violation Type:** Violation

**Observation:** Thermometer in WIC is not properly located.

**Corrective Action:** Reposition thermometer so that it is located in the warmest part of the refrigeration unit. Correct By: 08-Feb-2024

**Code Citation:** 4-204.112 (A) - THERMOMETERS - FUNCTIONALITY - WARMEST PART OF UNIT

**Correct By** :02/08/2024

Priority Foundation

**Violation Type:** Violation

**Observation:** No thermometer is present for monitoring temperatures in thin mass foods.

**Corrective Action:** Provide a thermometer capable of taking temperatures in thin mass food items. Correct By: 08-Feb-2024

**Code Citation:** 4-302.12 (B) - FOOD TEMPERATURE MEASURING DEVICES - SMALL DIAMETER PROBE

**Correct By** :02/08/2024

Core

**Violation Type:** Violation

**Observation:** Ice scoop in icream parlor area stored on unsanitized surface

**Corrective Action:** Store in-use utensils in the food item with handle extended, on a clean surface, running dipper well or in a container of water greater than 135°F. removed during Correct By: 08-Feb-2024

**Code Citation:** 3-304.12 - IN-USE UTENSILS, BETWEEN USE STORAGE

**Correct By** :02/08/2024

Core

**Violation Type:** Violation

**Observation:** equipment improperly stored on the floor in drygoods

**Corrective Action:** Clean equipment and utensils shall be stored in a self-draining position to allow for air drying and covered or inverted. Correct By: 08-Feb-2024

**Code Citation:** 4-903.11 (B) - UTENSILS, EQUIPMENT AND SINGLE-USE ARTICLES, LINENS - STORING PROHIBITIONS - SELF DRAINING POSITION

### **CRITICAL VIOLATION**

**Correct By** :02/08/2024

Priority - Critical

**Violation Type:** Violation

**Observation:** Plumbing system not provided with an air gap or backflow prevention at utility sink in Willow duplex

**Corrective Action:** Provide air gap or backflow prevention device. Plumbing systems shall be provided with backflow prevention at each point of use in the food establishment. Correct By: 08-Feb-2024

**Code Citation:** 5-203.14 - PLUMBING - BACKFLOW PREVENTION DEVICE - WHEN REQUIRED

**SUPPLEMENTAL INFORMATION**

Is there a letter from EMS indicating they can respond within 15 minutes?: No

Initials of IN CAMP holder of first aid and CPR/AED certificate at time of inspection

Course completed for First Aid:

Course completed for CPR/AED:

Initials of WILDERNESS TRIPS holder of First aid and CPR/AED certificate at time of inspection

Course completed for First Aid:

Course completed for CPR/AED:

Initials and Course completed for CPR/AED for any additional health staff member(s) IN CAMP

Course completed for CPR/AED:

Initials and Course of Lifeguard(s) serving during sessions at time of inspection

Lifeguards's Initials:

Course completed for First Aid:

Course completed for CPR/AED:

Course completed for Lifeguard:

**CERTIFIED FOOD PROTECTION MANAGER**

Name	Certificate Number	Expiration Date
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**EQUIPMENT TEMPERATURES**

Type	Name	Equipment Temperature
	Bev-Aire #4 cooler	35 °F
	Bev-Aire #3 ice cream area	35 °F
	Bev-Aire #1 ice cream area	40 °F
	WIC	41 °F
	Bev-Aire #2 cooler	40 °F

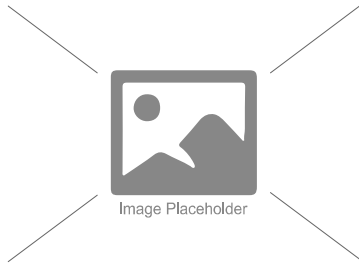
**FOOD ITEM AND LOCATION**

Food Item	Food State	Temperature
CH cooked duck WIC		41 °F
CH Lettuce BA#4		37 °F
CH BA#2 milk		38 °F

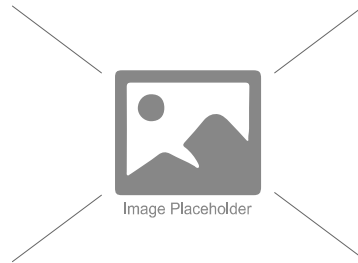
**SANITIZING AND WAREWASHING**

Machine Name	Sanitization Method	Thermo Label	PPM	Sanitizer Name	Sanitizer Type	Temperature	pH
3 comp sink	manual		300	Ecolab multiquat	quat		
B1	manual		300	Ecolab multiquat	quat		
ADS	High Temp	160					

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**PERSON IN CHARGE - Pat Wilcox -**



**SANITARIAN - Edward Newburry**

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*Wis. Stat. § 97.67*  
*Subch. IV Wis. Admin. Code*  
*ch. ATCP 78*

## RECREATIONAL EDUCATIONAL CAMP INSPECTION REPORT

<b>ESTABLISHMENT NAME</b>		<b>LICENSE TYPE</b>	<b>LICENSE NUMBER</b>
CAMP ST CROIX		Recreational/Educational Camp - Simple	ATCP-006327
<b>ESTABLISHMENT ADDRESS</b>		<b>LICENSEE</b>	
		MAYFLOWER CONG CHURCH ATCP-L10660	
<b>ESTABLISHMENT PHONE</b>	<b>ESTABLISHMENT EMAIL</b>	<b>LICENSEE ADDRESS</b>	
612 859-0898	peter.dahl@troop187.org	106 E DIAMOND LAKE RD MINNEAPOLIS, MN 55419	
<b>INSPECTION DATE</b>	<b>INSPECTION TYPE</b>	<b>FOLLOW-UP REQUIRED - TYPE</b>	<b>FOLLOW-UP DATE</b>
8/8/2024	Routine	NO	

### COMMENTS

This was a routine inspection with Louis Goessling being the person in charge. Water activities were not checked due to it not being in use this summer.

### OBSERVED VIOLATIONS

For detailed code language regarding violations, go to:

[ATCP 78 - Recreational and Educational Camps](#), [WI Food Code](#) and [ATCP 75 Retail Food Establishments](#).

## SUPPLEMENTAL INFORMATION

Is there a letter from EMS indicating they can respond within 15 minutes?: Yes

### Initials of IN CAMP holder of first aid and CPR/AED certificate at time of inspection

Course completed for First Aid: IR

Course completed for CPR/AED: IR

### Initials of WILDERNESS TRIPS holder of First aid and CPR/AED certificate at time of inspection

Course completed for First Aid: IR

Course completed for CPR/AED: IR

### Initials and Course completed for CPR/AED for any additional health staff member(s) IN CAMP

Course completed for CPR/AED:

### Initials and Course of Lifeguard(s) serving during sessions at time of inspection

Lifeguards's Initials: N/A

Course completed for First Aid: N/A

Course completed for CPR/AED: N/A

Course completed for Lifeguard: N/A

## CERTIFIED FOOD PROTECTION MANAGER

Name	Certificate Number	Expiration Date
Scott Lund		07/17/2026

## EQUIPMENT TEMPERATURES

Type	Name	Equipment Temperature
Reach-In Cooler	Right Fridge	35.0 °F
Reach-In Freezer	Left Freezer	0.0 °F
Reach-In Freezer	Right Freezer	0.0 °F
Reach-In Cooler	Left Fridge	38.0 °F

## FOOD ITEM AND LOCATION

Food Item	Food State	Temperature
Left Fridge-Milk	Cold Holding	40.0 °F
Right Fridge-Tomato	Cold Holding	39.0 °F



## SANITIZING AND WAREWASHING

Machine Name	Sanitization Method	Thermo Label	PPM	Sanitizer Name	Sanitizer Type	Temperature	pH
3 Compartment	Chemical		100	Bleach	Chlorine		
Spray Bottle	Chemical		100	Bleach	Chlorine		

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**PERSON IN CHARGE - Lousi Goessling - Camp Director**



**SANITARIAN - Alex Hintz  
Public Health Sanitarian-Advanced  
alex.hintz@wisconsin.gov | (608) 977-0242**



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*Wis. Stat. § 97.67*  
*Subch. IV Wis. Admin. Code*  
*ch. ATCP 78*

## RECREATIONAL EDUCATIONAL CAMP INSPECTION REPORT

<b>ESTABLISHMENT NAME</b> UW-WHITEWATER SUMMER CAMPS		<b>LICENSE TYPE</b> Recreational/Educational Camp - Simple	<b>LICENSE NUMBER</b> ATCP-005559
<b>ESTABLISHMENT ADDRESS</b>		<b>LICENSEE</b> UW-WHITEWATER CONTINUING EDUC SERVICES ATCP-L24032	
<b>ESTABLISHMENT PHONE</b> (262) 472 - 3165	<b>ESTABLISHMENT EMAIL</b> andersml@uww.edu	<b>LICENSEE ADDRESS</b> 800 W MAIN ST WHITEWATER, WI 53190	
<b>INSPECTION DATE</b> 7/26/2024	<b>INSPECTION TYPE</b> Administrative Follow-Up	<b>FOLLOW-UP REQUIRED - TYPE</b> NO	<b>FOLLOW-UP DATE</b>

### COMMENTS

- Administrative follow up for fire alarm system reports and fire alarm panel codes for camper sleeping quarter buildings. No operator signature required; report emailed to operator.
- Annual fire alarm tests for building Arey/Fricker, Ma'iingan attached with report; emailed to inspector by operator.
- Email chain (attached) for fire alarm codes:
  - Arey/Fricker - 0 LL North Stair 80-LS141: This code states that someone pushed the area of the rescue button. The panel has been reset and the issue is no longer present.
  - Arey/Fricker - 2 N Stair 80-LS141: This code also means that someone pushed the area of the rescue button. The panel has been reset and the issue has gone away.
  - Ma'iingan - 2FL S Area B212B 50: This code means that the speaker in the room is not communicating with the fire alarm panel. We are currently looking into this issue.

### OBSERVED VIOLATIONS

For detailed code language regarding violations, go to:

[ATCP 78 - Recreational and Educational Camps](#), [WI Food Code](#) and [ATCP 75 Retail Food Establishments](#).

**SUPPLEMENTAL INFORMATION**

Is there a letter from EMS indicating they can respond within 15 minutes?:

Initials of IN CAMP holder of first aid and CPR/AED certificate at time of inspection

Course completed for First Aid:

Course completed for CPR/AED:

Initials of WILDERNESS TRIPS holder of First aid and CPR/AED certificate at time of inspection

Course completed for First Aid:

Course completed for CPR/AED:

Initials and Course completed for CPR/AED for any additional health staff member(s) IN CAMP

Course completed for CPR/AED:

Initials and Course of Lifeguard(s) serving during sessions at time of inspection

Lifeguards's Initials:

Course completed for First Aid:

Course completed for CPR/AED:

Course completed for Lifeguard:

**CERTIFIED FOOD PROTECTION MANAGER**

Name	Certificate Number	Expiration Date
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**EQUIPMENT TEMPERATURES**

Type	Name	Equipment Temperature
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**FOOD ITEM AND LOCATION**

Food Item	Food State	Temperature
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**SANITIZING AND WAREWASHING**

Machine Name	Sanitization Method	Thermo Label	PPM	Sanitizer Name	Sanitizer Type	Temperature	pH
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**PERSON IN CHARGE - -**

**SANITARIAN - Shannon Johnson-Windsor**

**shannon.johnsonwindsor@wisconsin.gov |**



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Wis. Stat. § 97.67  
 Subch. IV Wis. Admin. Code  
 ch. ATCP 78

## RECREATIONAL EDUCATIONAL CAMP INSPECTION REPORT

<b>ESTABLISHMENT NAME</b> LUTHER PARK INC		<b>LICENSE TYPE</b> Recreational/Educational Camp - Simple	<b>LICENSE NUMBER</b> ATCP-006026
<b>ESTABLISHMENT ADDRESS</b>		<b>LICENSEE</b> LUTHER PARK INC ATCP-L15899	
<b>ESTABLISHMENT PHONE</b> 715 656-7244	<b>ESTABLISHMENT EMAIL</b> camp@lutherpark.com	<b>LICENSEE ADDRESS</b> 30376 LAKES DR DANBURY, WI 54830	
<b>INSPECTION DATE</b> 7/26/2024	<b>INSPECTION TYPE</b> Routine	<b>FOLLOW-UP REQUIRED - TYPE</b> NO	<b>FOLLOW-UP DATE</b>

### COMMENTS

This was a routine inspection with Leah Mcdougall being the person in charge.

### OBSERVED VIOLATIONS

For detailed code language regarding violations, go to:

[ATCP 78 - Recreational and Educational Camps](#), [WI Food Code](#) and [ATCP 75 Retail Food Establishments](#).

**Correct By** :07/26/2024

Core

**Violation Type:** COS

**Observation:** Wiping cloth used for wiping surfaces stored in soap bucket with no sanitizer.

**Corrective Action:** Cloths used for wiping counters and equipment shall be stored in a sanitizing solution in between uses. Operator remade the sani bucket with proper sanitizer.

**Code Citation:** 3-304.14 (B) (1) - WIPING CLOTHS - USE LIMITATION - CLOTHS FOR WIPING COUNTERS STORED IN SANITIZER

**Correct By** :08/22/2024

Priority Foundation

**Violation Type:** Violation

**Observation:** Camper sexual abuse prevention training was not completed within the past 12 months by camp staff.

**Corrective Action:** Conduct camper sexual abuse prevention training on an annual basis. This needs to be done prior to start of camp in 2025.

**Code Citation:** ATCP 78.26 (5) (c) *Annually Trained* - Camper Sexual Abuse Prevention Training

**SUPPLEMENTAL INFORMATION**

Is there a letter from EMS indicating they can respond within 15 minutes?: Yes

Initials of IN CAMP holder of first aid and CPR/AED certificate at time of inspection

Course completed for First Aid: JB-AMT

Course completed for CPR/AED: JB-AMT

Initials of WILDERNESS TRIPS holder of First aid and CPR/AED certificate at time of inspection

Course completed for First Aid: N/A

Course completed for CPR/AED: N/A

Initials and Course completed for CPR/AED for any additional health staff member(s) IN CAMP

Course completed for CPR/AED:

Initials and Course of Lifeguard(s) serving during sessions at time of inspection

Lifeguards's Initials: PB,LY

Course completed for First Aid: Red Cross

Course completed for CPR/AED: Red Cross

Course completed for Lifeguard: Red Cross

**CERTIFIED FOOD PROTECTION MANAGER**

Name	Certificate Number	Expiration Date
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**EQUIPMENT TEMPERATURES**

Type	Name	Equipment Temperature
Walk-In Freezer	WIF	0.0 °F
Walk-In Cooler	WIC	33.0 °F
Reach-In Cooler	Beverage Air	25.0 °F
Chest Freezer	Chest Freezer	0.0 °F

**FOOD ITEM AND LOCATION**

Food Item	Food State	Temperature
Beverage Air-Sour Cream	Cold Holding	37.0 °F
WIC-Tomato	Cold Holding	37.0 °F
Sausage	Hot Holding	191.0 °F

**SANITIZING AND WAREWASHING**

Machine Name	Sanitization Method	Thermo Label	PPM	Sanitizer Name	Sanitizer Type	Temperature	pH
Sani Bucket 2nd	Chemical		100	Aerocep	Chlorine		
Dishwasher	Chemical		50	Intercon	Chlorine		
Sani Buckert	Chemical		0	Aerocep	Chlorine		

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**PERSON IN CHARGE - Leah Mcdougall - Executive Director**

**SANITARIAN - Alex Hintz  
Public Health Sanitarian-Advanced  
alex.hintz@wisconsin.gov | (608) 977-0242**



Wisconsin Department of Agriculture, Trade and Consumer Protection  
 Division of Food and Recreational Safety  
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Wis. Stat. § 97.67  
 Subch. IV Wis. Admin. Code  
 ch. ATCP 78

## RECREATIONAL EDUCATIONAL CAMP INSPECTION REPORT

<b>ESTABLISHMENT NAME</b> CAMP CROIX ASSOCIATION		<b>LICENSE TYPE</b> Recreational/Educational Camp - Simple	<b>LICENSE NUMBER</b> ATCP-010255
<b>ESTABLISHMENT ADDRESS</b>		<b>LICENSEE</b> CAMP CROIX ASSOC INC ATCP-L01539	
<b>ESTABLISHMENT PHONE</b> (715) 338 - 6132	<b>ESTABLISHMENT EMAIL</b> Vicepresident@campcroix.org	<b>LICENSEE ADDRESS</b> 2192 ELM DR WHITE BEAR LAKE, MN 55110	
<b>INSPECTION DATE</b> 7/25/2024	<b>INSPECTION TYPE</b> Routine	<b>FOLLOW-UP REQUIRED - TYPE</b> NO	<b>FOLLOW-UP DATE</b>

### COMMENTS

This was a routine inspection with TJ Holderbecker being the person in charge. License is going to go from simple to Rec Ed Camp moderate with hospitality.

### OBSERVED VIOLATIONS

For detailed code language regarding violations, go to:

[ATCP 78 - Recreational and Educational Camps](#), [WI Food Code](#) and [ATCP 75 Retail Food Establishments](#).

#### **CRITICAL VIOLATION**

**Correct By** :07/25/2024

Priority - Critical

**Violation Type:** COS

**Observation:** Raw eggs were found stored above ready to eat food items in the Norlake Cooler.,

**Corrective Action:** Eggs were moved and proper placement of raw items was discussed.

**Code Citation:** 3-302.11 (A) (1) - PACKAGED AND UNPACKAGED FOOD - RAW OVER RTE-FOODS

**Correct By** :07/25/2024

Core

**Violation Type:** Violation

**Observation:** The insect control device is located over the handwashing sink.

**Corrective Action:** Remove or relocate this device so that it is not over any food prep area.

**Code Citation:** 6-202.13 (B) (1) - INSECT CONTROL DEVICES, DESIGN AND INSTALLATION - IMPROPERLY LOCATED



## SUPPLEMENTAL INFORMATION

Is there a letter from EMS indicating they can respond within 15 minutes?: No

### Initials of IN CAMP holder of first aid and CPR/AED certificate at time of inspection

Course completed for First Aid: KL

Course completed for CPR/AED: KL

### Initials of WILDERNESS TRIPS holder of First aid and CPR/AED certificate at time of inspection

Course completed for First Aid: N/A

Course completed for CPR/AED: N/A

### Initials and Course completed for CPR/AED for any additional health staff member(s) IN CAMP

Course completed for CPR/AED: N/A

### Initials and Course of Lifeguard(s) serving during sessions at time of inspection

Lifeguards's Initials: KH, TH, TH, PH, CE

Course completed for First Aid: Red Cross

Course completed for CPR/AED: Red Cross

Course completed for Lifeguard: Red Cross

## CERTIFIED FOOD PROTECTION MANAGER

Name	Certificate Number	Expiration Date
Trevor Holderbecker	16315461	03/17/2028

## EQUIPMENT TEMPERATURES

Type	Name	Equipment Temperature
Chest Freezer	Chest Freezer	0.0 °F
Reach-In Cooler	Norlake Cooler	40.0 °F
Walk-In Freezer	WIF	0.0 °F
Walk-In Cooler	WIC	38.0 °F
Reach-In Cooler	Mccall Cooler	40.0 °F

**FOOD ITEM AND LOCATION**

Food Item	Food State	Temperature
Mccall Cooler-Tukey	Cold Holding	37.0 °F
Norlake Cooler-Chicken	Cold Holding	39.0 °F
WIC-Strawberry	Cold Holding	41.0 °F
HH-Sloppy Joe	Hot Holding	142.0 °F

**SANITIZING AND WAREWASHING**

Machine Name	Sanitization Method	Thermo Label	PPM	Sanitizer Name	Sanitizer Type	Temperature	pH
Sani Bottle	Chemical		50	Bleach	Chlorine		
Dishwasher	Mechanical	> 160					

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**PERSON IN CHARGE - TJ Holderbecker - Program Director**

**SANITARIAN - Alex Hintz  
Public Health Sanitarian-Advanced  
alex.hintz@wisconsin.gov | (608) 977-0242**



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*Wis. Stat. § 97.67*  
*Subch. IV Wis. Admin. Code*  
*ch. ATCP 78*

## RECREATIONAL EDUCATIONAL CAMP INSPECTION REPORT

<b>ESTABLISHMENT NAME</b>		<b>LICENSE TYPE</b>	<b>LICENSE NUMBER</b>
ST JOSEPH FORMATION CENTER		Recreational/Educational Camp - Simple	ATCP-003040
<b>ESTABLISHMENT ADDRESS</b>		<b>LICENSEE</b>	
		CATHOLIC YOUTH EXPEDITIONS INC ATCP-L05493	
<b>ESTABLISHMENT PHONE</b>	<b>ESTABLISHMENT EMAIL</b>	<b>LICENSEE ADDRESS</b>	
920 268-3057	cyexpeditions12@gmail.com	3035 OBRIEN RD BAILEYS HARBOR, WI 54202	
<b>INSPECTION DATE</b>	<b>INSPECTION TYPE</b>	<b>FOLLOW-UP REQUIRED - TYPE</b>	<b>FOLLOW-UP DATE</b>
7/24/2024	Follow-Up	NO	

### COMMENTS

Status: CORRECTED 7-24-2024 (The camp operator provided a photos by email showing that an emergency phone is available and required information noted near the phone.

Type: Violation

Correct By Date: 08/02/2024

Violation Code: ATCP 78.27 (1) (h) (4.) Posted emergency information - Health Center; phone; first aid; AED

Comments: The camp does not have emergency information attached or posted near the telephone including emergency numbers, 911, and facility's location.

Corrective Actions: Post signage or attach to the phone the camp address and how to dial 911.

### OBSERVED VIOLATIONS

For detailed code language regarding violations, go to:

[ATCP 78 - Recreational and Educational Camps](#), [WI Food Code](#) and [ATCP 75 Retail Food Establishments](#).

**SUPPLEMENTAL INFORMATION**

Is there a letter from EMS indicating they can respond within 15 minutes?:

Initials of IN CAMP holder of first aid and CPR/AED certificate at time of inspection

Course completed for First Aid:

Course completed for CPR/AED:

Initials of WILDERNESS TRIPS holder of First aid and CPR/AED certificate at time of inspection

Course completed for First Aid:

Course completed for CPR/AED:

Initials and Course completed for CPR/AED for any additional health staff member(s) IN CAMP

Course completed for CPR/AED:

Initials and Course of Lifeguard(s) serving during sessions at time of inspection

Lifeguards's Initials:

Course completed for First Aid:

Course completed for CPR/AED:

Course completed for Lifeguard:

**CERTIFIED FOOD PROTECTION MANAGER**

Name	Certificate Number	Expiration Date
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**EQUIPMENT TEMPERATURES**

Type	Name	Equipment Temperature
Reach-In Freezer	tall white (left most)	
Reach-In Freezer	tall white (rightmost)	
Chest Freezer	White	
Walk-In Freezer	Walk in freezer	
Reach-In Cooler	3 door tall stainless steel	
Walk-In Freezer	Walk in freezer	
Chest Freezer	White	
Reach-In Freezer	tall white (left most)	
Reach-In Freezer	tall white (rightmost)	
Reach-In Cooler	3 door tall stainless steel	

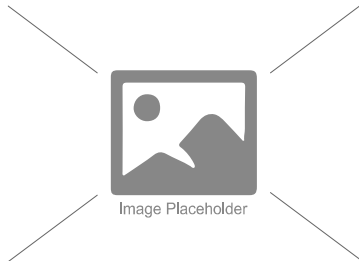
**FOOD ITEM AND LOCATION**

Food Item	Food State	Temperature
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**SANITIZING AND WAREWASHING**

Machine Name	Sanitization Method	Thermo Label	PPM	Sanitizer Name	Sanitizer Type	Temperature	pH
3 compartment sink	chemical						
3 compartment sink	chemical						

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**PERSON IN CHARGE - Fr Greg Parent -**

**SANITARIAN - Craig Kratcha  
Environmental Sanitarian - Senior  
Craig.Kratcha@wisconsin.gov | (920) 868-0133**



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*Wis. Stat. § 97.67*  
*Subch. IV Wis. Admin. Code*  
*ch. ATCP 78*

## RECREATIONAL EDUCATIONAL CAMP INSPECTION REPORT

<b>ESTABLISHMENT NAME</b>		<b>LICENSE TYPE</b>	<b>LICENSE NUMBER</b>
NORTHLAND MISSION		Recreational/Educational Camp - Simple	ATCP-010245
<b>ESTABLISHMENT ADDRESS</b>		<b>LICENSEE</b>	
		Northland Mission, Inc. ATCP-L18372	
<b>ESTABLISHMENT PHONE</b>	<b>ESTABLISHMENT EMAIL</b>	<b>LICENSEE ADDRESS</b>	
(715) 324 - 6900	eric.herb@northlandcamp.org	W10085 PIKE PLAINS RD DUNBAR, WI 54119	
<b>INSPECTION DATE</b>	<b>INSPECTION TYPE</b>	<b>FOLLOW-UP REQUIRED - TYPE</b>	<b>FOLLOW-UP DATE</b>
7/23/2024	Administrative Follow-Up	NO	

### COMMENTS

- The facility has provided proof showing that a new smoke detector was provided and installed in the pioneer village #1.
- This is an administrative follow up and no signature is required.

### OBSERVED VIOLATIONS

For detailed code language regarding violations, go to:

[ATCP 78 - Recreational and Educational Camps](#), [WI Food Code](#) and [ATCP 75 Retail Food Establishments](#).

**SUPPLEMENTAL INFORMATION**

Is there a letter from EMS indicating they can respond within 15 minutes?:

Initials of IN CAMP holder of first aid and CPR/AED certificate at time of inspection

Course completed for First Aid:

Course completed for CPR/AED:

Initials of WILDERNESS TRIPS holder of First aid and CPR/AED certificate at time of inspection

Course completed for First Aid:

Course completed for CPR/AED:

Initials and Course completed for CPR/AED for any additional health staff member(s) IN CAMP

Course completed for CPR/AED:

Initials and Course of Lifeguard(s) serving during sessions at time of inspection

Lifeguards's Initials:

Course completed for First Aid:

Course completed for CPR/AED:

Course completed for Lifeguard:

**CERTIFIED FOOD PROTECTION MANAGER**

Name	Certificate Number	Expiration Date
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## EQUIPMENT TEMPERATURES

Type	Name	Equipment Temperature
Chest Freezer	Chest Freezer	
Chest Freezer	Chest Freezer SNACK SHOP	
Reach-In Freezer	Ice Cream Freezer SNACK SHOP	
Walk-In Cooler	Walk-in Cooler Middle	
Chest Freezer	Chest Freezer	
Chest Freezer	Chest Freezer SNACK SHOP	
Walk-In Cooler	Walk-In Produce Cooler	
Reach-In Cooler	True Reach in Cooler SNACK SHOP	
Walk-In Cooler	Walk-In Produce Cooler	
Reach-In Freezer	Ice Cream Freezer SNACK SHOP	
Reach-In Cooler	True Reach in Cooler COFFEE SHOP	
Walk-In Cooler	Walk-in Cooler Middle	
Walk-In Freezer	Walk-in Freezer	
Reach-In Cooler	True Reach in Cooler COFFEE SHOP	
Reach-In Cooler	True Reach in Cooler SNACK SHOP	
Walk-In Freezer	Walk-in Freezer	

## FOOD ITEM AND LOCATION

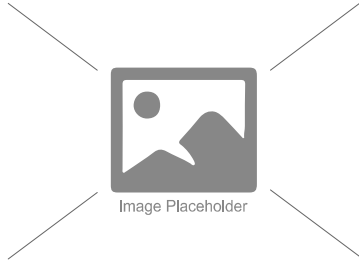
Food Item	Food State	Temperature
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## SANITIZING AND WAREWASHING

Machine Name	Sanitization Method	Thermo Label	PPM	Sanitizer Name	Sanitizer Type	Temperature	pH
4 Compartment Snack Shack	Manual						
Hobart High Temp Machine	High Temp						



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A handwritten signature in black ink, appearing to read "Tyler Hischke".

**PERSON IN CHARGE - -**

**SANITARIAN - Tyler Hischke**

**tyler.hischke@wisconsin.gov | (608) 772-9826**



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 Division of Food and Recreational Safety  
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Wis. Stat. § 97.67  
 Subch. IV Wis. Admin. Code  
 ch. ATCP 78

## RECREATIONAL EDUCATIONAL CAMP INSPECTION REPORT

<b>ESTABLISHMENT NAME</b> ST JOSEPH FORMATION CENTER		<b>LICENSE TYPE</b> Recreational/Educational Camp - Simple	<b>LICENSE NUMBER</b> ATCP-003040
<b>ESTABLISHMENT ADDRESS</b>		<b>LICENSEE</b> CATHOLIC YOUTH EXPEDITIONS INC ATCP-L05493	
<b>ESTABLISHMENT PHONE</b> 920 268-3057	<b>ESTABLISHMENT EMAIL</b> cyexpeditions12@gmail.com	<b>LICENSEE ADDRESS</b> 3035 OBRIEN RD BAILEYS HARBOR, WI 54202	
<b>INSPECTION DATE</b> 7/23/2024	<b>INSPECTION TYPE</b> Routine	<b>FOLLOW-UP REQUIRED - TYPE</b> NO	<b>FOLLOW-UP DATE</b>

### COMMENTS

The well water was tested for nitrate 5-22-2024 (Safe - WSLH)

The well water was tested for coliform 5-23-2024 (Safe-WSLH)

Summertime includes non-adult teens; other time of the year the camp is for adults only.

Gregory Parent holds a DNR boater safety certificate.

Matt Bettag MD is the camps consulting physician.

### OBSERVED VIOLATIONS

For detailed code language regarding violations, go to:

[ATCP 78 - Recreational and Educational Camps, WI Food Code](#) and [ATCP 75 Retail Food Establishments](#).

**Correct By** :08/02/2024

Priority Foundation

**Violation Type:** Violation

**Observation:** No building evacuation diagram is provided in a sleeping room in [location] with 2 or more exit doors to the outside.

**Corrective Action:** Provide a building evacuation diagram in plain view in each building that has sleeping rooms with 2 or more exit doors to the outside.

**Code Citation:** *ATCP 78.24 (8) (f) (1.) Directions for Escape - Fire Prevention; notification, extinguisher, alarms, CO*

**Correct By** :08/02/2024

Priority Foundation

**Violation Type:** Violation

**Observation:** The background check threshold policy has not been reviewed and signed within the last 3 years.

**Corrective Action:** Provide an up-to-date policy reviewed, signed, and dated every 3 years.

**Code Citation:** *ATCP 78.26 (1) (c) (2.) Policy Signed* - Background Check; frequency, policy

**Correct By** :08/02/2024

Priority Foundation

**Violation Type:** Violation

**Observation:** The lifeguard and attendant staffing plan does not include the location of first aid kits.

**Corrective Action:** Indicate the location of all first aid kits in the aquatic activity area in the lifeguard and attendant staffing plan. A template is available on the department webpage that is available for use that covers the lifeguard staffing plan requirements.

**Code Citation:** *ATCP 78.26 (3) (c) (2.) (e.) First Aid Kit Location* - Lifeguard and attendant staffing plan

**Correct By** :08/02/2024

Priority Foundation

**Violation Type:** Violation

**Observation:** The written security plan does not address visitors, vendors and contracted services entry to the camp premises.

**Corrective Action:** Include a provision to address visitor entry onto premises in the written camp security plan.

**Code Citation:** *ATCP 78.26 (5) (a) (1.) Security Plan Visitors* - Camp security; emergency written plans

### **CRITICAL VIOLATION**

**Correct By** :08/02/2024

Priority - Critical

**Violation Type:** Violation

**Observation:** The camp does not have emergency information attached or posted near the telephone including emergency numbers, 911, and facility's location.

**Corrective Action:** Post signage or attach to the phone the camp address and how to dial 911.

**Code Citation:** *ATCP 78.27 (1) (h) (4.) Posted emergency information* - Health Center; phone; first aid; AED

**SUPPLEMENTAL INFORMATION**

Is there a letter from EMS indicating they can respond within 15 minutes?: Yes

Initials of IN CAMP holder of first aid and CPR/AED certificate at time of inspection

Course completed for First Aid:

Course completed for CPR/AED:

Initials of WILDERNESS TRIPS holder of First aid and CPR/AED certificate at time of inspection

Course completed for First Aid: AM

Course completed for CPR/AED: SOLO Wilderness First Responder

Initials and Course completed for CPR/AED for any additional health staff member(s) IN CAMP

Course completed for CPR/AED:

Initials and Course of Lifeguard(s) serving during sessions at time of inspection

Lifeguards's Initials: BW

Course completed for First Aid: Red Cross

Course completed for CPR/AED: Red Cross

Course completed for Lifeguard: Red Cross

**CERTIFIED FOOD PROTECTION MANAGER**

<b>Name</b>	<b>Certificate Number</b>	<b>Expiration Date</b>
Amanda Sattler	ServSafe	04/20/2028

**EQUIPMENT TEMPERATURES**

<b>Type</b>	<b>Name</b>	<b>Equipment Temperature</b>
Reach-In Cooler	3 door tall stainless steel	36.0 °F
Chest Freezer	White	0.0 °F
Walk-In Freezer	Walk in freezer	0.0 °F
Reach-In Freezer	tall white (left most)	0.0 °F
Reach-In Freezer	tall white (rightmost)	0.0 °F

**FOOD ITEM AND LOCATION**

<b>Food Item</b>	<b>Food State</b>	<b>Temperature</b>
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**SANITIZING AND WAREWASHING**

Machine Name	Sanitization Method	Thermo Label	PPM	Sanitizer Name	Sanitizer Type	Temperature	pH
3 compartment sink	chemical			Lysol No-Rinse	Quat		

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**PERSON IN CHARGE - -**

**SANITARIAN - Craig Kratcha  
Environmental Sanitarian - Senior  
Craig.Kratcha@wisconsin.gov | (920) 868-0133**



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 ch. ATCP 78

## RECREATIONAL EDUCATIONAL CAMP INSPECTION REPORT

<b>ESTABLISHMENT NAME</b>		<b>LICENSE TYPE</b>	<b>LICENSE NUMBER</b>
NORTHLAND MISSION		Recreational/Educational Camp - Simple	ATCP-010245
<b>ESTABLISHMENT ADDRESS</b>		<b>LICENSEE</b>	
		Northland Mission, Inc. ATCP-L18372	
<b>ESTABLISHMENT PHONE</b>	<b>ESTABLISHMENT EMAIL</b>	<b>LICENSEE ADDRESS</b>	
(715) 324 - 6900	eric.herb@northlandcamp.org	W10085 PIKE PLAINS RD DUNBAR, WI 54119	
<b>INSPECTION DATE</b>	<b>INSPECTION TYPE</b>	<b>FOLLOW-UP REQUIRED - TYPE</b>	<b>FOLLOW-UP DATE</b>
7/17/2024	Routine	YES Administrative Follow-up	07/22/2024

### COMMENTS

- Smoke detectors were expired. Provide proof to the department within 5 days (July 22, 2024) that new fire alarms were purchased and installed. Proof of installation consists of photos of the following:

1. Receipt for new detector
2. Back of the smoke detector
3. Location of the newly installed detector

- The well water report was observed and safe as of 6/25/2024.

- Discussed new code changes such as background check, and challenge course inspections.

- Discussed with the kitchen staff employee illness policy, handwashing when/where, and contamination event procedures.

- In the Coffee Shop, ensure that the door leading into the handwashing sink remains open during operation hours. The door cannot be closed due to the only handwashing sink available is in that room. If found closed during operating hours a separate handwashing sink must be installed or door must be removed.

- Any observations that are observed in three consecutive inspections a re-inspection. Re-inspections are chargeable and incur a fee. Item noted during the last two inspections was the food contact surface soiled (meat slicer).

## OBSERVED VIOLATIONS

For detailed code language regarding violations, go to:

[ATCP 78 - Recreational and Educational Camps, WI Food Code](#) and [ATCP 75 Retail Food Establishments](#).

### CRITICAL VIOLATION

Priority - Critical

**Violation Type:** COS, Violation

**Observation:** Raw pork shoulders in the walk-cooler in the kitchen was over cheese.

**Corrective Action:** CORRECTED: Reorganized food storage so that ready-to-eat foods are stored above raw animal food and raw vegetables. Discard ready-to-eat foods that show evidence of contamination.

**Code Citation:** 3-302.11 (A) (1) - PACKAGED AND UNPACKAGED FOOD - RAW OVER RTE-FOODS

**Correct By :** 10/17/2024

Priority Foundation

**Violation Type:** Repeat, Violation

**Observation:** Meat slicer is visibly soiled.

**Corrective Action:** Maintain food contact surfaces in a clean condition.

**Code Citation:** 4-601.11 (A) - FOOD CONTACT SURFACES - SOILED

**Correct By :** 10/17/2024

Priority Foundation

**Violation Type:** Violation

**Observation:** Mattress in pioneer village #1 has mattress pads that are ripped and are not covering all the mattress.

**Corrective Action:** Provide a mattress or mattress cover that is easily cleanable and nonabsorbent.

**Code Citation:** ATCP 78.21 (1) (e) (3.) (a.) *Mattress Pad* - Adequate bedding and screening provided

### CRITICAL VIOLATION

**Correct By :** 07/20/2024

Priority - Critical

**Violation Type:** Violation

**Observation:** Smoke detector in the pioneer village #1 has expired.

**Corrective Action:** Provide operational smoke detectors within manufacturer's lifespan in all sleeping rooms and required locations.

**Code Citation:** ATCP 78.24 (8) (d) *Smoke Detection* - Fire Prevention; notification, extinguisher, alarms, CO

**Correct By :** 07/27/2024

Priority Foundation

**Violation Type:** Violation

**Observation:** Persons living on the premises, or a member of the camp's staff did not have the required background check, staff that are considered minors (ages 17-14, do not have current background check).

**Corrective Action:** Provide a means to account for proper camp staff screening including a criminal background check during the hiring process.

**Code Citation:** ATCP 78.26 (1) (a) *Applicable Individuals* - Background Check; frequency, policy

**CRITICAL VIOLATION**

**Correct By** :07/20/2024

Priority - Critical

**Violation Type:** Violation

**Observation:** The camp could not provide the third-party inspection documentation. The invoice for the service was provided but no report was available.

**Corrective Action:** Contact the third party inspection vendor to request a copy of the inspection reports for all high and low element challenge courses. The high and low element challenge course shall not be operated until written evidence of an inspection conducted by a qualified third party has been received or completed.

**Code Citation:** *ATCP 78.26 (3) (b) (1.) (a.) Inspection Documentation - Challenge Course inspection*

**Correct By** :10/17/2024

Core

**Violation Type:** Violation

**Observation:** The exterior door in the kitchen is not tight fitting. The bottom of the screen door exhibits an air gap that does not prevent entrance of insects or rodents.

**Corrective Action:** Provide a self-closing and tight fitting door to prevent the entrance of insects or rodents.

**Code Citation:** *6-202.15 (A) (3) - INSECTS AND RODENTS - OUTER OPENINGS - SOLID, SELF-CLOSING AND TIGHT FITTING DOORS*

**CRITICAL VIOLATION**

**Correct By** :07/20/2024

Priority - Critical

**Violation Type:** Violation

**Observation:** Lettuce, tomatoes, and cheese in the customer self-service area is not protected from contamination.

**Corrective Action:** Provide a food shield, food guard, or other effective means to protect food from potential consumer contamination.

**Code Citation:** *3-306.11 - FOOD CONTAMINATION PREVENTED BY CUSTOMERS IN FOOD DISPLAY*

**Correct By** :07/27/2024

Priority Foundation

**Violation Type:** Violation

**Observation:** The lifeguard and attendant staffing plan does not include the location of first aid kits.

**Corrective Action:** Indicate the location of all first aid kits in the aquatic activity area in the lifeguard and attendant staffing plan. Lifeguards carry the first aid kits on person, indicate this in the plan.

**Code Citation:** *ATCP 78.26 (3) (c) (2.) (e.) First Aid Kit Location - Lifeguard and attendant staffing plan*

**Correct By** :07/27/2024

Priority Foundation

**Violation Type:** Violation

**Observation:** Boating activity offered without an accountability system for participants in the water. There is no verifiable method for check in/out with the boating.

**Corrective Action:** Follow the approved method for checking persons in and out of the water, such as, but not limited to using the 'buddy system', or using tag boards and equipment check out systems as developed by the adult aquatic supervisor.

**Code Citation:** *ATCP 78.26 (3) (c) (9.) (e.) Buddy system in Water - Swimmer accountability in water; boating*

**Correct By** :10/17/2024

Core

**Violation Type:** Violation

**Observation:** An irreversible registering thermometer is not provided for measuring utensil surface temperatures in the hot water mechanical warewashing operation.

**Corrective Action:** Provide an irreversible registering thermometer.

**Code Citation:** *4-302.13 (B) - WAREWASHING - MECHANICAL HOT WATER - TEMPERATURE MEASURING DEVICES*



**Correct By** :07/27/2024

Priority Foundation

**Violation Type:** Violation

**Observation:** The water is incapable of meeting the peak demands of the food establishment at the main kitchen handwashing sink and sinks in the snack shop.

**Corrective Action:** Provide an adequate water source or system that will meet the peak demands of this facility and also ensure that hot water generation will meet peak water demands as well.

**Code Citation:** 5-103.11 - HOT AND COLD WATER - CAPACITY - QUANTITY AND AVAILABILITY

**Correct By** :10/17/2024

Core

**Violation Type:** Violation

**Observation:** The four-compartment sink in the snack shop is not maintained in good repair. Hot water is only accessible turning off the main water line.

**Corrective Action:** The plumbing system shall be maintained in good repair. Repair or replace defective or leaking plumbing.

**Code Citation:** 5-205.15 (B) - PLUMBING - SYSTEM MAINTAINED IN GOOD REPAIR

### **CRITICAL VIOLATION**

**Correct By** :07/20/2024

Priority - Critical

**Violation Type:** Violation

**Observation:** For camps that last longer than 3 days, qualified health services staff delegated individual for administering medication has not completed the DPI medication administration online modules.

**Corrective Action:** Verify that delegated individuals administering medication complete the DPI medication administration online modules.

**Code Citation:** *ATCP 78.27 (4) (e) Delegated staff medication administration module* - Medication administration

**Correct By** :10/17/2024

Priority Foundation

**Violation Type:** Violation

**Observation:** Basketball court nearest the cafeteria is in disrepair. The slab of concrete is not in good repair and is a trip hazard.

**Corrective Action:** Repair playground equipment to prevent camper injury.

**Code Citation:** *ATCP 78.30 (1) (b) Overall Good Repair* - Playground Equipment

**SUPPLEMENTAL INFORMATION**

Is there a letter from EMS indicating they can respond within 15 minutes?: Yes

Initials of IN CAMP holder of first aid and CPR/AED certificate at time of inspection

Course completed for First Aid: TR

Course completed for CPR/AED: EMT

Initials of WILDERNESS TRIPS holder of First aid and CPR/AED certificate at time of inspection

Course completed for First Aid:

Course completed for CPR/AED:

Initials and Course completed for CPR/AED for any additional health staff member(s) IN CAMP

Course completed for CPR/AED:

Initials and Course of Lifeguard(s) serving during sessions at time of inspection

Lifeguards's Initials: EH, KL, LR, JK

Course completed for First Aid: American Red Cross

Course completed for CPR/AED: American Red Cross

Course completed for Lifeguard: American Red Cross

**CERTIFIED FOOD PROTECTION MANAGER**

Name	Certificate Number	Expiration Date
Pamela Yeadon		07/12/2028

**EQUIPMENT TEMPERATURES**

<b>Type</b>	<b>Name</b>	<b>Equipment Temperature</b>
Walk-In Cooler	Walk-In Produce Cooler	40 °F
Walk-In Cooler	Walk-in Cooler Middle	36 °F
Walk-In Freezer	Walk-in Freezer	0 °F
Chest Freezer	Chest Freezer	0 °F
Reach-In Cooler	True Reach in Cooler SNACK SHOP	40 °F
Chest Freezer	Chest Freezer SNACK SHOP	0 °F
Reach-In Freezer	Ice Cream Freezer SNACK SHOP	0 °F
Reach-In Cooler	True Reach in Cooler COFFEE SHOP	41 °F
Walk-In Cooler	Walk-In Produce Cooler	40 °F
Walk-In Cooler	Walk-in Cooler Middle	36 °F
Walk-In Freezer	Walk-in Freezer	0 °F
Chest Freezer	Chest Freezer	0 °F
Reach-In Cooler	True Reach in Cooler COFFEE SHOP	41 °F
Reach-In Freezer	Ice Cream Freezer SNACK SHOP	0 °F
Chest Freezer	Chest Freezer SNACK SHOP	0 °F
Reach-In Cooler	True Reach in Cooler SNACK SHOP	40 °F

**FOOD ITEM AND LOCATION**

Food Item	Food State	Temperature
Cooked Burger	Cook	193.7 °F
Meat Ball Middle WIC	Cold Holding	39.1 °F
Shredded Chicken Middle WIC	Cold Holding	38.9 °F
Pasta Middle WIC	Cold Holding	41.2 °F
Milk Silver King Dispenser	Cold Holding	40.1 °F
Hot dog True RIC Snack Shack	Cold Holding	39.2 °F
Tomatoes Produce WIC	Cold Holding	43.0 °F
Cooked Corn	Cook	200.9 °F
Milk Superior RIC Coffee shop	Cold Holding	41.2 °F

**SANITIZING AND WAREWASHING**

Machine Name	Sanitization Method	Thermo Label	PPM	Sanitizer Name	Sanitizer Type	Temperature	pH
4 Compartment Snack Shack	Manual			Not Set up			
Hobart High Temp Machine	High Temp	PASSED		High Temp	High Temp		

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**PERSON IN CHARGE - Eric Herb - Camp Director**



**SANITARIAN - Tyler Hischke**

tyler.hischke@wisconsin.gov | (608) 772-9826



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*Wis. Stat. § 97.67*  
*Subch. IV Wis. Admin. Code*  
*ch. ATCP 78*

## RECREATIONAL EDUCATIONAL CAMP INSPECTION REPORT

<b>ESTABLISHMENT NAME</b>		<b>LICENSE TYPE</b>	<b>LICENSE NUMBER</b>
ROYAL SERVANTS TRAINING CAMP		Recreational/Educational Camp - Simple	ATCP-001537
<b>ESTABLISHMENT ADDRESS</b>		<b>LICENSEE</b>	
		REIGN MINISTRIES ATCP-L05429	
<b>ESTABLISHMENT PHONE</b>	<b>ESTABLISHMENT EMAIL</b>	<b>LICENSEE ADDRESS</b>	
(608) 429 - 1368	sswanson@reignministries.org	5401 W BROADWAY AVE MINNEAPOLIS, MN 55428	
<b>INSPECTION DATE</b>	<b>INSPECTION TYPE</b>	<b>FOLLOW-UP REQUIRED - TYPE</b>	<b>FOLLOW-UP DATE</b>
6/19/2024	Routine	NO	

### COMMENTS

Routine inspection conducted by Sanitarian Joseph Vue.  
 During the inspection, only campers available are staff campers and college student campers for training. Following week will be high school (minor) campers. No observed food service during the inspection.  
 Water sample provided - negative for coliform - 06/10/2024.  
 All campers are tent campers. Facility is provided for the infirmary.  
 No changes for this camping year.

### OBSERVED VIOLATIONS

For detailed code language regarding violations, go to:  
[ATCP 78 - Recreational and Educational Camps](#), [WI Food Code](#) and [ATCP 75 Retail Food Establishments](#).

## SUPPLEMENTAL INFORMATION

Is there a letter from EMS indicating they can respond within 15 minutes?: Yes

### Initials of IN CAMP holder of first aid and CPR/AED certificate at time of inspection

Course completed for First Aid: Gracie Heider - BLS - American heart Association - 04/19/2024

Course completed for CPR/AED: Gracie Heider - BLS - American Heart Association - 04/19/2024

### Initials of WILDERNESS TRIPS holder of First aid and CPR/AED certificate at time of inspection

Course completed for First Aid: n/a

Course completed for CPR/AED: n/a

### Initials and Course completed for CPR/AED for any additional health staff member(s) IN CAMP

Course completed for CPR/AED: Nichole Anderson - Heartsaver CPR AED - American Heart Association - 06/10/2024

### Initials and Course of Lifeguard(s) serving during sessions at time of inspection

Lifeguards's Initials: n/a

Course completed for First Aid: n/a

Course completed for CPR/AED: n/a

Course completed for Lifeguard: n/a

## CERTIFIED FOOD PROTECTION MANAGER

Name	Certificate Number	Expiration Date
Stacey Swanson	20537831	05/08/2026

## EQUIPMENT TEMPERATURES

Type	Name	Equipment Temperature
	Reach in cooler - 1	34.0 °F
	reach in cooler -2	37.0 °F
	reach in freezer - 2	-2.0 °F
	reach in cooler - 4	35.0 °F
	reach in freezer - 3	0.0 °F
	reach in freezer - 1	10.0 °F
	chest freezer	-2.0 °F
	reach in cooler - 3	37.0 °F

**FOOD ITEM AND LOCATION**

Food Item	Food State	Temperature
reach in cooler - 4 - ham	Cold Holding	37.0 °F

**SANITIZING AND WAREWASHING**

Machine Name	Sanitization Method	Thermo Label	PPM	Sanitizer Name	Sanitizer Type	Temperature	pH
3 compartment sinks	chemical		n/o	Chlorox	Chlorine		

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**PERSON IN CHARGE - Stacey Swanson - Person in Charge**

**SANITARIAN - Joseph Vue**

**joseph.vue@wisconsin.gov | (608) 720-0697**



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Wis. Stat. § 97.67  
 Subch. IV Wis. Admin. Code  
 ch. ATCP 78

## RECREATIONAL EDUCATIONAL CAMP INSPECTION REPORT

<b>ESTABLISHMENT NAME</b> LAKE HELEN BIBLE CAMP		<b>LICENSE TYPE</b> Recreational/Educational Camp - Simple with Hospitality	<b>LICENSE NUMBER</b> ATCP-010243
<b>ESTABLISHMENT ADDRESS</b>		<b>LICENSEE</b> LAKE HELEN BIBLE CAMP INC ATCP-L12469	
<b>ESTABLISHMENT PHONE</b> (937) 238 - 1690	<b>ESTABLISHMENT EMAIL</b> ditmer534@aol.com	<b>LICENSEE ADDRESS</b> PO BOX 140 WAUSAUKEE, WI 54177	
<b>INSPECTION DATE</b> 8/12/2024	<b>INSPECTION TYPE</b> Routine	<b>FOLLOW-UP REQUIRED - TYPE</b> NO	<b>FOLLOW-UP DATE</b>

### COMMENTS

- The well water report was observed and safe as of 6/25/2024.
- Discussed the new code changes including user group agreement contract requirements, background checks and DPI medication dispensing.
- For the user group, during the inspection, the health service person is a RN from Minnesota. Minnesota is not a part of the agreement, but the group has met the minimum requirement for health services with other certifications. The sanitarian reached out to the Rec Ed specialist to clarify what is required. Once that information is provided sanitarian will provide that to the operator. The health service person can apply for the Temporary license through DSPS or can take the DPI medication dispensing course.

### OBSERVED VIOLATIONS

For detailed code language regarding violations, go to:

[ATCP 78 - Recreational and Educational Camps](#), [WI Food Code](#) and [ATCP 75 Retail Food Establishments](#).

**Correct By** :08/22/2024

Priority Foundation

**Violation Type:** Violation

**Observation:** Agreement did not include required specialized program activity staffing pursuant to s. ATCP 78.25.

**Corrective Action:** Written agreement must include party responsible for specialized program activities.

**Code Citation:** *ATCP 78.16 (1) (c) (7.) Specialized Program Activity Staffing* - Written Agreement



**Correct By** :08/22/2024

Priority Foundation

**Violation Type:** Violation

**Observation:** Agreement did not include staff to camper minimum ratio.

**Corrective Action:** Written agreement must include minimum proper supervision ratio of adults to campers.

**Code Citation:** *ATCP 78.16 (1) (c) (8.) Staffing Ratio* - Written Agreement

**Correct By** :08/22/2024

Priority Foundation

**Violation Type:** Violation

**Observation:** Agreement did not include confirmation of background checks for rental group leaders.

**Corrective Action:** Written agreement must include confirmation of rental group leaders background check was completed.

**Code Citation:** *ATCP 78.16 (1) (c) (9.) Background Check* - Written Agreement

**Correct By** :08/22/2024

Priority Foundation

**Violation Type:** Violation

**Observation:** Agreement did not include confirmation of sexual abuse prevention training for rental group leaders.

**Corrective Action:** Written agreement must include confirmation of rental group leaders sexual abuse prevention training was completed.

**Code Citation:** *ATCP 78.16 (1) (c) (10.) Sexual Abuse Prevention Training* - Written Agreement

**Correct By** :08/22/2024

Priority Foundation

**Violation Type:** Violation

**Observation:** A death, injury, or illness report was not submitted as required for an incident at the facility.

**Corrective Action:** Complete a death, injury, or illness report on the discussed incident immediately to comply with the requirement.

**Code Citation:** *ATCP 78.16 (1) (c) (12.) DII Reporting* - Death, Injury, Illness Reporting

### **CRITICAL VIOLATION**

**Correct By** :08/12/2024

Priority - Critical

**Violation Type:** COS, Violation

**Observation:** Carbon monoxide detector in the lodge, Smokey Bear Cabin and the bathrooms are expired or unavailable.

**Corrective Action:** CORRECTED: The operator has provided the carbon monoxide detector.

Provide operational carbon monoxide detectors within manufacturer's lifespan in all sleeping rooms and required locations with fuel burning appliances.

**Code Citation:** *ATCP 78.24 (9) (a) Carbon monoxide detection* - Fire Prevention; notification, extinguisher, alarms, CO

### **CRITICAL VIOLATION**

**Correct By** :08/12/2024

Priority - Critical

**Violation Type:** COS, Violation

**Observation:** Archery equipment storage found unlocked or unsecured on camp premises.

**Corrective Action:** CORRECTED: The equipment was secured during the inspection. The trained adult supervisor shall secure and lock all firearms, ammunition or archery equipment when not in use.

**Code Citation:** *ATCP 78.26 (3) (a) (4.) (a.) Proper Storage of Firearms or Archery* - Supervision of specialized program activity; safety; storage

**Correct By :** 11/12/2024

Core

**Violation Type:** Violation

**Observation:** The exterior door in the kitchen is kept opened during food preparation and food service.

**Corrective Action:** Provide a self-closing and tight fitting door to prevent the entrance of insects or rodents, by installing a screen door.

**Code Citation:** 6-202.15 (A) (3) - INSECTS AND RODENTS - OUTER OPENINGS - SOLID, SELF-CLOSING AND TIGHT FITTING DOORS

**CRITICAL VIOLATION**

**Correct By :** 08/15/2024

Priority - Critical

**Violation Type:** Violation

**Observation:** The camp could not provide the third party inspection documentation for the rope swing going into the lake.

**Corrective Action:** Contact the third party inspection vendor to request a copy of the inspection reports for all high and low element challenge courses. The high and low element challenge course shall not be operated until written evidence of an inspection conducted by a qualified third party has been received or completed.

**Code Citation:** ATCP 78.26 (3) (b) (1.) (a.) *Inspection Documentation* - Challenge Course inspection

**Correct By :** 08/22/2024

Priority Foundation

**Violation Type:** Violation

**Observation:** The lifeguard and attendant staffing plan does not include how visual obstructions are addressed by lifeguard placement for the raft in the swimming area.

**Corrective Action:** Indicate how any visual obstructions are addressed by lifeguard placement in the lifeguard and attendant staffing plan.

**Code Citation:** ATCP 78.26 (3) (c) (2.) (d.) *Visual Obstructions* - Lifeguard and attendant staffing plan

**Correct By :** 08/22/2024

Priority Foundation

**Violation Type:** Violation

**Observation:** There is no method for checking campers in and out of aquatic program activities.

**Corrective Action:** An approved method of checking persons in and out of the water shall be provided by the adult aquatic supervisor.

**Code Citation:** ATCP 78.26 (3) (c) (9.) (d.) *Check-In Check-Out Method* - Swimmer accountability in water; boating

**Correct By :** 11/12/2024

Core

**Violation Type:** Violation

**Observation:** Concrete block and wood shelves are used to stored food in the walk-in freezer. The concrete and wood are not smooth and easily cleanable.

**Corrective Action:** Provide non-food contact surfaces that are constructed of a corrosion resistant, nonabsorbent, and smooth material.

**Code Citation:** 4-101.19 - EQUIPMENT AND UTENSILS - NONFOOD CONTACT SURFACES - CONSTRUCTED

**Correct By :** 11/12/2024

Core

**Violation Type:** Violation

**Observation:** There is no service sink provided in food establishment, it was discussed that mop water gets disposed of in the woods.

**Corrective Action:** Provide at least 1 service sink or curbed cleaning facility.

**Code Citation:** 5-203.13 - PLUMBING - SERVICE SINK

**CRITICAL VIOLATION**

**Correct By** :08/15/2024

Priority - Critical

**Violation Type:** Violation

**Observation:** For camps that last longer than 3 days, qualified health services staff delegated individual for administering medication has not completed the DPI medication administration online modules.

**Corrective Action:** Verify that delegated individuals administering medication complete the DPI medication administration online modules.

**Code Citation:** *ATCP 78.27 (4) (e) Delegated staff medication administration module - Medication administration*

**SUPPLEMENTAL INFORMATION**

Is there are a letter from EMS indicating they can respond within 15 minutes?: No

Initials of IN CAMP holder of first aid and CPR/AED certificate at time of inspection

Course completed for First Aid: SA- American Heart Association BLS

Course completed for CPR/AED: SA- American Heart Association BLS

Initials of WILDERNESS TRIPS holder of First aid and CPR/AED certificate at time of inspection

Course completed for First Aid: N/A

Course completed for CPR/AED: N/A

Initials and Course completed for CPR/AED for any additional health staff member(s) IN CAMP

Course completed for CPR/AED: AG-American Red Cross

Initials and Course of Lifeguard(s) serving during sessions at time of inspection

Lifeguards's Initials: AG, NV

Course completed for First Aid: American Red Cross

Course completed for CPR/AED: American Red Cross

Course completed for Lifeguard: American Red Cross

**CERTIFIED FOOD PROTECTION MANAGER**

Name	Certificate Number	Expiration Date
Tatyana Belonovich	ServSafe	06/08/2028

**EQUIPMENT TEMPERATURES**

Type	Name	Equipment Temperature
Walk-In Cooler	Walk-inCooler	38.0 °F
Reach-In Cooler	Home-style Cooler/Freezer	40.0 °F
Walk-In Freezer	Walk-in Freezer	0.0 °F
Reach-In Freezer	2 Standing Freezers	0.0 °F

**FOOD ITEM AND LOCATION**

Food Item	Food State	Temperature
Milk WIC	Cold Holding	41.6 °F
Steak WIC	Cold Holding	40.9 °F
Ham WIC	Cold Holding	38.6 °F
Gravy in hot case	Hot Holding	195.1 °F

**SANITIZING AND WAREWASHING**

Machine Name	Sanitization Method	Thermo Label	PPM	Sanitizer Name	Sanitizer Type	Temperature	pH
3 Compartment Sink	Chemical/Manual		400	Members Mark Quat	Quat		
Wiping Bucket	Chemical/Manual		200	Members Mark Quat	Quat		

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**PERSON IN CHARGE - Judi Ditmer - Owner**



**SANITARIAN - Tyler Hischke**

**tyler.hischke@wisconsin.gov | (608) 772-9826**



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Wis. Stat. § 97.67  
 Subch. IV Wis. Admin. Code  
 ch. ATCP 78

## RECREATIONAL EDUCATIONAL CAMP INSPECTION REPORT

<b>ESTABLISHMENT NAME</b> BIRCH CREEK MUSIC CENTER		<b>LICENSE TYPE</b> Recreational/Educational Camp - Simple with Hospitality		<b>LICENSE NUMBER</b> ATCP-002526	
<b>ESTABLISHMENT ADDRESS</b>		<b>LICENSEE</b> Birch Creek Music Performance Center, Inc. ATCP-L08651			
<b>ESTABLISHMENT PHONE</b> (920) 868 - 2240	<b>ESTABLISHMENT EMAIL</b> mona@birchcreek.org	<b>LICENSEE ADDRESS</b> PO BOX 230 EGG HARBOR, WI 54209-0230			
<b>INSPECTION DATE</b> 8/9/2024	<b>INSPECTION TYPE</b> Follow-Up	<b>FOLLOW-UP REQUIRED - TYPE</b> NO		<b>FOLLOW-UP DATE</b>	

### COMMENTS

The operator provided photos by phone message on 8-7-2024 showing the following report items have been corrected.

Status: CORRECTED (New cooler provided; photos shows 40F)

Type: COS

Violation Code: 3-501.16 (A) (2) AND (B) - TCS FOOD - COLD HOLDING

Comments: Milk in the self serve display cooler was held at 49F.

Corrective Actions: Maintain cold time/temperature control for safety food at or below 41°F. Discard unsafe food items. The operator discarded the milk in this cooler at this inspection.

Status: CORRECTED

Type: Repeat

Correct By Date: 08/11/2024

Violation Code: 4-302.14 - WAREWASHING - SANITIZING SOLUTION - TESTING DEVICES

Comments: A quat test kit is not available for checking sanitizer concentrations (from the quat dispenser by the mop sink).

Corrective Actions: Provide a quat test kit or other device for measuring the concentration of sanitizing solutions.

Status: CORRECTED (An email from the training provider was received as evidence of acceptable anaphylaxis training)

Type: Violation

Correct By Date: 08/11/2024

Violation Code: ATCP 78.27 (2) (b) (5.) (b.) Anaphylaxis Training Certificate - Onsite health services staff requirements met

Comments: Anaphylaxis training certificate for each camp health staff is not available on camp premises.

Corrective Actions: Maintain anaphylaxis training certificates on camp premises.

The operator also showed new smoke alarms were provided in the barn where expired ones were noted and showed a co detector was in place in the furnace room that was inaccessible at the routine inspection due to classes in session.

## **OBSERVED VIOLATIONS**

For detailed code language regarding violations, go to:

[ATCP 78 - Recreational and Educational Camps](#), [WI Food Code](#) and [ATCP 75 Retail Food Establishments](#).

## **SUPPLEMENTAL INFORMATION**

Is there a letter from EMS indicating they can respond within 15 minutes?:

Initials of IN CAMP holder of first aid and CPR/AED certificate at time of inspection

Course completed for First Aid:

Course completed for CPR/AED:

Initials of WILDERNESS TRIPS holder of First aid and CPR/AED certificate at time of inspection

Course completed for First Aid:

Course completed for CPR/AED:

Initials and Course completed for CPR/AED for any additional health staff member(s) IN CAMP

Course completed for CPR/AED:

Initials and Course of Lifeguard(s) serving during sessions at time of inspection

Lifeguards's Initials:

Course completed for First Aid:

Course completed for CPR/AED:

Course completed for Lifeguard:

## **CERTIFIED FOOD PROTECTION MANAGER**

Name	Certificate Number	Expiration Date
------	--------------------	-----------------

## EQUIPMENT TEMPERATURES

Type	Name	Equipment Temperature
Reach-In Cooler	True 2 Door ("That One"_)	
Reach-In Freezer	True 2 Door ("The Chilly One")	
Reach-In Cooler	True 2 Door ("This One")	
Reach-In Cooler	True 2 Door ("The Other One")	
Reach-In Cooler	True 2 Door ("The Other One")	
Reach-In Cooler	Avantco display self serve cooler	
Reach-In Cooler	Avantco display self serve cooler	
Other	Juice Dispensing Cooler	
Reach-In Cooler	True 2 Door ("That One"_)	
Reach-In Cooler	True 2 Door ("This One")	
Other	Juice Dispensing Cooler	
Reach-In Freezer	Tall White	
Reach-In Freezer	True 2 Door ("The Chilly One")	
Reach-In Freezer	Tall White	

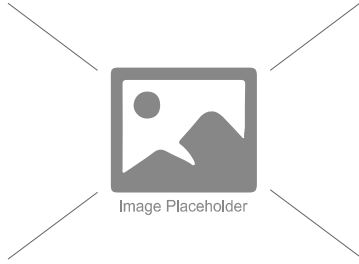
## FOOD ITEM AND LOCATION

Food Item	Food State	Temperature
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## SANITIZING AND WAREWASHING

Machine Name	Sanitization Method	Thermo Label	PPM	Sanitizer Name	Sanitizer Type	Temperature	pH
CMA Dish Machine	Low Temp						
CMA Dish Machine	Low Temp						
Wiping Cloth							
Wiping Cloth							

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A handwritten signature in black ink, appearing to be "C. Kratcha".

**PERSON IN CHARGE - -**

**SANITARIAN - Craig Kratcha  
Environmental Sanitarian - Senior  
Craig.Kratcha@wisconsin.gov | (920) 868-0133**





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*ch. ATCP 78*

## RECREATIONAL EDUCATIONAL CAMP INSPECTION REPORT

<b>ESTABLISHMENT NAME</b> BIRCH CREEK MUSIC CENTER		<b>LICENSE TYPE</b> Recreational/Educational Camp - Simple with Hospitality	<b>LICENSE NUMBER</b> ATCP-002526
<b>ESTABLISHMENT ADDRESS</b>		<b>LICENSEE</b> Birch Creek Music Performance Center, Inc. ATCP-L08651	
<b>ESTABLISHMENT PHONE</b> (920) 868 - 2240	<b>ESTABLISHMENT EMAIL</b> mona@birchcreek.org	<b>LICENSEE ADDRESS</b> PO BOX 230 EGG HARBOR, WI 54209-0230	
<b>INSPECTION DATE</b> 8/1/2024	<b>INSPECTION TYPE</b> Routine	<b>FOLLOW-UP REQUIRED - TYPE</b> YES Administrative Follow-up	<b>FOLLOW-UP DATE</b> 08/11/2024

### COMMENTS

A record from the WDNR well water database indicates the well water from the two wells on this premises were tested and found safe for coliform and nitrate on 5-1-2024.

The Egg Harbor Fire Department conducted a fire safety inspection of the premises and found no non-compliance as of 6-19-2024.

The camp staff are trained using the Stewards of Children - Darkness to Light program to meet the abuse prevention and awareness training requirement.

The inspector will consult with the program manager to see if the camp phone in the office while it is locked to campers (accessible by camp staff with key) meets the emergency phone requirement.

Medical dispensing records are kept in a paper bound record and transferred to UltraCamp for electronic recordkeeping.

The anaphylaxis training certificate requirement was discussed at this inspection. The director indicated that staff attended a training from Door County Medical Center, but the training provider did not issue a certificate. The director will follow up with the provided to see if a certificate can be issued. The director indicated that camp is over in a week. The certificate must be provided to the inspector before the next session of campers.

## OBSERVED VIOLATIONS

For detailed code language regarding violations, go to:

[ATCP 78 - Recreational and Educational Camps, WI Food Code](#) and [ATCP 75 Retail Food Establishments](#).

**Correct By** :09/01/2024

Core

**Violation Type:** Violation

**Observation:** The garden hose is connected to a splitter on the faucet on the side of the farm house. There is no backflow preventer on one of the splitter outlets.

**Corrective Action:** Provide a hose bibb backflow preventer on each side of the splitter.

**Code Citation:** *ATCP 78.18 (3) (c) Backflow* - Plumbing system constructed and maintained

**Correct By** :09/01/2024

Core

**Violation Type:** Violation

**Observation:** The following plumbing violations are noted: the toilet tank on the first floor of the farm house has the fill valve's critical inlet mark installed such that it is even in elevation with the top of the overflow, center tube.

**Corrective Action:** Have all plumbing violations corrected and provide documentation that the repairs are in compliance with State plumbing code. The critical level mark placed on the fill valve by the manufacturer must be at least one inch higher in elevation than the top of the middle overflow tube.

**Code Citation:** *ATCP 78.18 (4) Water Service Connections Meet State Requirements* - Plumbing system constructed and maintained

### CRITICAL VIOLATION

Priority - Critical

**Violation Type:** COS

**Observation:** Milk in the self serve display cooler was held at 49F.

**Corrective Action:** Maintain cold time/temperature control for safety food at or below 41°F. Discard unsafe food items. The operator discarded the milk in this cooler at this inspection.

**Code Citation:** *3-501.16 (A) (2) AND (B)* - TCS FOOD - COLD HOLDING

### CRITICAL VIOLATION

Priority - Critical

**Violation Type:** COS

**Observation:** Sausage links, sandwich meats, milk, clarified butter were not held at safe temperature in the True 2 door named "The Other One".

**Corrective Action:** Maintain cold time/temperature control for safety food at or below 41°F. Discard unsafe food items. TCS food items in this cooler were moved to the other 2 door cooler that was maintained 41F or less.

**Code Citation:** *3-501.16 (A) (2) AND (B)* - TCS FOOD - COLD HOLDING

Core

**Violation Type:** Violation

**Observation:** The juice dispenser does not have a thermometer.

**Corrective Action:** Provide a integral or permanently affixed temperature measuring device.

**Code Citation:** *4-204.112 (B)* - THERMOMETERS - FUNCTIONALITY - INTEGRAL OR PERMANENTLY AFFIXED MEASURING DEVICE

**REPEAT**

**Correct By** :08/11/2024

Priority Foundation

**Violation Type:** Repeat

**Observation:** A quat test kit is not available for checking sanitizer concentrations (from the quat dispenser by the mop sink).

**Corrective Action:** Provide a quat test kit or other device for measuring the concentration of sanitizing solutions.

**Code Citation:** 4-302.14 - WAREWASHING - SANITIZING SOLUTION - TESTING DEVICES

**CRITICAL VIOLATION**

**Correct By** :08/11/2024

Priority - Critical

**Violation Type:** Violation

**Observation:** Anaphylaxis training certificate for each camp health staff is not available on camp premises.

**Corrective Action:** Maintain anaphylaxis training certificates on camp premises.

**Code Citation:** *ATCP 78.27 (2) (b) (5.) (b.) Anaphylaxis Training Certificate* - Onsite health services staff requirements met

**SUPPLEMENTAL INFORMATION**

Is there are a letter from EMS indicating they can respond within 15 minutes?: Yes

Initials of IN CAMP holder of first aid and CPR/AED certificate at time of inspection

Course completed for First Aid: PG

Course completed for CPR/AED: American Heart Association

Initials of WILDERNESS TRIPS holder of First aid and CPR/AED certificate at time of inspection

Course completed for First Aid:

Course completed for CPR/AED:

Initials and Course completed for CPR/AED for any additional health staff member(s) IN CAMP

Course completed for CPR/AED:

Initials and Course of Lifeguard(s) serving during sessions at time of inspection

Lifeguards's Initials:

Course completed for First Aid:

Course completed for CPR/AED:

Course completed for Lifeguard:

**CERTIFIED FOOD PROTECTION MANAGER**

Name	Certificate Number	Expiration Date
Mary Niedzwiecki	ServSafe	04/14/2027

## EQUIPMENT TEMPERATURES

Type	Name	Equipment Temperature
Reach-In Cooler	True 2 Door ("This One")	30.0 °F
Reach-In Cooler	True 2 Door ("The Other One")	50.0 °F
Reach-In Freezer	True 2 Door ("The Chilly One")	0.0 °F
Reach-In Cooler	True 2 Door ("That One"_)	40.0 °F
Reach-In Freezer	Tall White	0.0 °F
Reach-In Cooler	Avantco display self serve cooler	55.0 °F
Other	Juice Dispensing Cooler	40.0 °F
Reach-In Cooler	True 2 Door ("The Other One")	50.0 °F
Reach-In Cooler	True 2 Door ("This One")	30.0 °F
Reach-In Cooler	True 2 Door ("That One"_)	40.0 °F
Reach-In Cooler	Avantco display self serve cooler	55.0 °F
Other	Juice Dispensing Cooler	40.0 °F
Reach-In Freezer	Tall White	0.0 °F
Reach-In Freezer	True 2 Door ("The Chilly One")	0.0 °F

## FOOD ITEM AND LOCATION

Food Item	Food State	Temperature
Cooked onions in This One	Cold Holding	41.0 °F
Hash browns in That One	Cooling	48.0 °F
potato salad in That One	Cold Holding	40.0 °F
clarified butter in The Other One	Cold Holding	43.0 °F
milk in The Other One	Cold Holding	43.0 °F
sausage links in The Other One	Cold Holding	47.0 °F
ham slices in The Other One	Cold Holding	47.0 °F
Cheeseburger Soup on stove top	Cook	178.0 °F
milk from carton in Avantco display cooler	Cold Holding	47.0 °F

**SANITIZING AND WAREWASHING**

Machine Name	Sanitization Method	Thermo Label	PPM	Sanitizer Name	Sanitizer Type	Temperature	pH
CMA Dish Machine	Low Temp		50	Low Temp Dish Machine Sanitizer	Chlorine		
Wiping Cloth			200	ProPower	Quat		
CMA Dish Machine	Low Temp		50	Low Temp Dish Machine Sanitizer	Chlorine		
Wiping Cloth			200	ProPower	Quat		

*Your signature on this form acknowledges receipt of the inspection report, and is not an agreement with the findings. Signing this form is voluntary. Personally identifiable information you provide may be used for purposes other than that for which it was collected. Wis Stat. §15.04(1)(m). Any operator aggrieved by an order of this department under this chapter may request a hearing as provided in Wis. Stat. ch.227, if state licensed; or a local ordinance, licensed by an agent health department.*

*Mona Christensen*



**PERSON IN CHARGE - - Director**

**SANITARIAN - Craig Kratcha  
Environmental Sanitarian - Senior  
Craig.Kratcha@wisconsin.gov | (920) 868-0133**



Wisconsin Department of Agriculture, Trade and Consumer Protection  
 Division of Food and Recreational Safety  
 PO Box 8911 Madison, WI 53708-8911  
 Phone: (608) 224-4682 Fax: (608) 224-4710

Wis. Stat. § 97.67  
 Subch. IV Wis. Admin. Code  
 ch. ATCP 78

## RECREATIONAL EDUCATIONAL CAMP INSPECTION REPORT

<b>ESTABLISHMENT NAME</b> WISCONSIN DISTRICT CAMP		<b>LICENSE TYPE</b> Recreational/Educational Camp - Simple with Hospitality		<b>LICENSE NUMBER</b> ATCP-010250
<b>ESTABLISHMENT ADDRESS</b>		<b>LICENSEE</b> UNITED PENTECOSTAL CHURCH ATCP-L14671		
<b>ESTABLISHMENT PHONE</b> 608 495-6300	<b>ESTABLISHMENT EMAIL</b> widistrictsec@gmail.com	<b>LICENSEE ADDRESS</b> PO BOX 670 REEDSBURG, WI 53959		
<b>INSPECTION DATE</b> 6/27/2024	<b>INSPECTION TYPE</b> Routine	<b>FOLLOW-UP REQUIRED - TYPE</b> NO	<b>FOLLOW-UP DATE</b>	

### COMMENTS

This was a joint inspection with Elizabeth Rettinger.

Reviewed new code and discussed variance for bunk bed set up and distance between heads with a guard.

Inspected Motel(Double Decker) room number 19 and 9, barracks rooms 3 and 9, boys cabin number 1 and girls cabin 6.

### OBSERVED VIOLATIONS

For detailed code language regarding violations, go to:

[ATCP 78 - Recreational and Educational Camps](#), [WI Food Code](#) and [ATCP 75 Retail Food Establishments](#).

**Correct By** :07/07/2024

Priority Foundation

**Violation Type:** Violation

**Observation:** The configuration of beds has less than 6 feet between the head's of campers.

**Corrective Action:** Provide at least 6 feet horizontally between the heads of campers.

**Code Citation:** *ATCP 78.21 (1) (a) (3.) Required Space Between Heads - Adequate sleeping quarters; capacity*

**Correct By** :07/07/2024

Priority Foundation

**Violation Type:** Violation

**Observation:** The configuration of beds has less than 3 feet horizontally between beds in Motel room 7.

**Corrective Action:** Provide at least 3 feet horizontally between the sides of the beds for proper emergency egress.

**Code Citation:** *ATCP 78.21 (1) (a) (4.) Required Space Between Beds - Adequate sleeping quarters; capacity*

**CRITICAL VIOLATION**

**Correct By** :06/30/2024

Priority - Critical

**Violation Type:** Violation

**Observation:** Returning camp staff and individuals residing on the premises 14 years of age or older do not have a current background check on-file, completed within the last 2 years. Specifically staff ages 14-17 do not have current background checks on-file.

**Corrective Action:** Provide background checks every 2 years for returning camp staff and any additional individuals who reside on the camp's premises.

**Code Citation:** *ATCP 78.26 (1) (d) Frequency - Background Check; frequency, policy*

**Correct By** :07/07/2024

Priority Foundation

**Violation Type:** Violation

**Observation:** Background check threshold policy is missing the component to address possession or facilitation of child pornography.

**Corrective Action:** Provide a complete background check threshold policy that includes crimes involving the possession or facilitation of child pornography.

**Code Citation:** *ATCP 78.26 (1) (c) (1.) (d.) Child Pornography - Background Check; frequency, policy*

**Correct By** :07/07/2024

Priority Foundation

**Violation Type:** Violation

**Observation:** Background check threshold policy is missing the component to address crimes against nature where children were affected.

**Corrective Action:** Provide a complete background check threshold policy that includes crimes against nature where children were affected.

**Code Citation:** *ATCP 78.26 (1) (c) (1.) (b.) Crimes Against Nature Affected Children - Background Check; frequency, policy*

**CRITICAL VIOLATION**

**Correct By** :06/30/2024

Priority - Critical

**Violation Type:** Violation

**Observation:** The camp challenge course for low challenge course has not had a third-party inspection completed within the past 24 months.

**Corrective Action:** Develop protocols to ensure a third party inspection is completed of all high and low element challenge courses every 24 months. The high and low element challenge course shall not be operated until written evidence of an inspection conducted by a qualified third party has been completed.

**Code Citation:** *ATCP 78.26 (3) (b) (1.) (b.) Inspection Frequency - Challenge Course inspection*

Core

**Violation Type:** COS

**Observation:** Crockpot used for time and temperature controlled for safety food is not ANSI certified or approved by the department.

**Corrective Action:** Unapproved equipment shall be removed from food service. Crockpot was sent home with the caretaker.

**Code Citation:** *4-205.11 - EQUIPMENT AND UTENSILS CONFORM TO ANSI STANDARDS*

**Correct By** :07/07/2024

Priority Foundation

**Violation Type:** Violation

**Observation:** The written security plan does not address active threats and possible intruders on the camp premises.

**Corrective Action:** Include a provision to address active threats and possible intruders on premises in the written camp security plan.

**Code Citation:** *ATCP 78.26 (5) (a) (3.) Active Threat Intruder Plan* - Camp security; emergency written plans

**Correct By** :07/07/2024

Priority Foundation

**Violation Type:** Violation

**Observation:** The written security plan does not address visitors, vendors and contracted services entry to the camp premises.

**Corrective Action:** Include a provision to address visitor entry onto premises in the written camp security plan.

**Code Citation:** *ATCP 78.26 (5) (a) (1.) Security Plan Visitors* - Camp security; emergency written plans

**Correct By** :07/07/2024

Priority Foundation

**Violation Type:** Violation

**Observation:** The written emergency response plan does not include provisions for the frequency of training and rehearsal provided to camp staff.

**Corrective Action:** Include in the camp emergency response plan provisions that address the frequency of training and rehearsal provided to camp staff.

**Code Citation:** *ATCP 78.26 (5) (b) (2.) Frequency of Staff Training* - Camp security; emergency written plans

**Correct By** :07/07/2024

Priority Foundation

**Violation Type:** Violation

**Observation:** No documentation of individuals who completed camper sexual abuse prevention training was provided. No training is in place at this time.

**Corrective Action:** Maintain individual certificate or dated documentation of participants who completed camper sexual abuse prevention training.

**Code Citation:** *ATCP 78.26 (5) (c) (2.) Proof Training Completed* - Camper Sexual Abuse Prevention Training

**Correct By** :07/07/2024

Priority Foundation

**Violation Type:** Violation

**Observation:** Sand tower is in disrepair. The tower is approximately three feet tall without railings to prevent falls, is missing a platform which is both sharp and could cause falls and has a nail head sticking out which could cause injury.

**Corrective Action:** Repair playground equipment to prevent camper injury.

**Code Citation:** *ATCP 78.30 (1) (b) Overall Good Repair* - Playground Equipment

### **CRITICAL VIOLATION**

**Correct By** :06/30/2024

Priority - Critical

**Violation Type:** Violation

**Observation:** Playground equipment S-hooks are not maintained closed.

**Corrective Action:** Replace or repair all open S- hooks on playground equipment to prevent camper injury.

**Code Citation:** *ATCP 78.30 (2) (a) (1.) "S" hooks* - Playground Equipment



**SUPPLEMENTAL INFORMATION**

Is there a letter from EMS indicating they can respond within 15 minutes?: Yes

Initials of IN CAMP holder of first aid and CPR/AED certificate at time of inspection

Course completed for First Aid: MN

Course completed for CPR/AED: MN

Initials of WILDERNESS TRIPS holder of First aid and CPR/AED certificate at time of inspection

Course completed for First Aid:

Course completed for CPR/AED:

Initials and Course completed for CPR/AED for any additional health staff member(s) IN CAMP

Course completed for CPR/AED: AW

Initials and Course of Lifeguard(s) serving during sessions at time of inspection

Lifeguards's Initials:

Course completed for First Aid:

Course completed for CPR/AED:

Course completed for Lifeguard:

**CERTIFIED FOOD PROTECTION MANAGER**

Name	Certificate Number	Expiration Date
Dan Dillabough		05/13/2029

## EQUIPMENT TEMPERATURES

Type	Name	Equipment Temperature
Walk-In Cooler	Walk in cooler 1	30.0 °F
Walk-In Cooler	Walk in 2	40.0 °F
Other	Norris Milk Dispenser	34.0 °F
Reach-In Cooler	Double door cooler in cafeteria	41.0 °F
Reach-In Freezer	4 door reach in	0.0 °F
Walk-In Freezer	Outdoor WIF	0.0 °F
Reach-In Cooler	Norlake	41.0 °F
Reach-In Cooler	Zero Zone	38.0 °F
Reach-In Freezer	Atosa	0.0 °F
Prep Cooler	True	30.0 °F
Reach-In Cooler	Double door True	40.0 °F
Chest Freezer	Canteen Chest freezer	0.0 °F

## FOOD ITEM AND LOCATION

Food Item	Food State	Temperature
Taco Meat in WIC 1	Cold Holding	30.0 °F
Chicken Tenders	Hot Holding	165.0 °F
Mac and cheese	Hot Holding	167.0 °F
Cucumber WIC 2	Cold Holding	40.0 °F
Cottage cheese in WIC 2	Cold Holding	40.0 °F
white milk in Norris	Cold Holding	34.0 °F
Chicken Tender	Cook	181.0 °F
Eggs at 11:20	Cooling	70.0 °F
Eggs @ 12:15	Cooling	43.0 °F
Sausage @ 11:20	Cooling	44.0 °F
sausage @ 12:15	Cooling	38.0 °F
cheese in Canteen zero Zone	Cold Holding	38.0 °F

**SANITIZING AND WAREWASHING**

Machine Name	Sanitization Method	Thermo Label	PPM	Sanitizer Name	Sanitizer Type	Temperature	pH
High Temp Dishwasher		passed					
3 compartment sink	chemical			Eco lab	quaternary sanitizer		200.0

*Your signature on this form acknowledges receipt of the inspection report, and is not an agreement with the findings. Signing this form is voluntary. Personally identifiable information you provide may be used for purposes other than that for which it was collected. Wis Stat. §15.04(1)(m). Any operator aggrieved by an order of this department under this chapter may request a hearing as provided in Wis. Stat. ch.227, if state licensed; or a local ordinance, licensed by an agent health department.*



**PERSON IN CHARGE - Ed Herman - Secretary**



**SANITARIAN - Sarah Scanlan**

**Sarah.Scanlan@wisconsin.gov |**