

# Food Establishment Inspection Report

Jackson County Health Department PO Box 307 – 415 Health Department Rd Murphysboro IL 62966		(618) 684-3143 ext. 128	No. of Risk Factor/Intervention Violations	0	Date	5/8/14
Establishment		License/Permit #	No. of Repeat Risk Factor/Intervention Violations	0	Time In	11:15
Street Address			Permit Holder	Steve Rodgers	Time Out	12:10
City/State		ZIP Code	Purpose of Inspection	Routine	Risk Category	I
El Greco		1109				
516 S IL Ave		62901				
Carbon Dale						

## FOODBORNE ILLNESS RISK FACTORS AND PUBLIC HEALTH INTERVENTIONS

Circle designated compliance status (IN, OUT, N/O, N/A) for each numbered item  
**IN**=in compliance    **OUT**=not in compliance    **N/O**=not observed    **N/A**=not applicable  
 Mark "X" in appropriate box for COS and/or R  
**COS**=corrected on-site during inspection    **R**=repeat violation

**Risk factors** are important practices or procedures identified as the most prevalent contributing factors of foodborne illness or injury. **Public health interventions** are control measures to prevent foodborne illness or injury.

Compliance Status		COS	R
<b>Supervision</b>			
1	<input checked="" type="radio"/> In <input checked="" type="radio"/> Out		
Person in charge present, demonstrates knowledge, and performs duties			
2	<input checked="" type="radio"/> In <input checked="" type="radio"/> Out, N/A		
Certified Food Protection Manager (CFPM)			
<b>Employee Health</b>			
3	<input checked="" type="radio"/> In <input checked="" type="radio"/> Out		
Management, food employee and conditional employee; knowledge, responsibilities and reporting			
4	<input checked="" type="radio"/> In <input checked="" type="radio"/> Out		
Proper use of restriction and exclusion			
5	<input checked="" type="radio"/> In <input checked="" type="radio"/> Out		
Procedures for responding to vomiting and diarrheal events			
<b>Good Hygienic Practices</b>			
6	<input checked="" type="radio"/> In <input checked="" type="radio"/> Out, N/O		
Proper eating, tasting, drinking, or tobacco use			
7	<input checked="" type="radio"/> In <input checked="" type="radio"/> Out, N/O		
No discharge from eyes, nose, and mouth			
<b>Preventing Contamination by Hands</b>			
8	<input checked="" type="radio"/> In <input checked="" type="radio"/> Out, N/O		
Hands clean and properly washed			
9	<input checked="" type="radio"/> In <input checked="" type="radio"/> Out, N/A, N/O		
No bare hand contact with RTE food or a pre-approved alternative procedure properly allowed			
10	<input checked="" type="radio"/> In <input checked="" type="radio"/> Out		
Adequate handwashing sinks properly supplied and accessible			
<b>Approved Source</b>			
11	<input checked="" type="radio"/> In <input checked="" type="radio"/> Out		
Food obtained from approved source			
12	<input checked="" type="radio"/> In, <input checked="" type="radio"/> Out, N/A, N/O		
Food received at proper temperature			
13	<input checked="" type="radio"/> In <input checked="" type="radio"/> Out		
Food in good condition, safe, and unadulterated			
14	<input checked="" type="radio"/> In, <input checked="" type="radio"/> Out, N/A, N/O		
Required records available: shellstock tags, parasite destruction			

Compliance Status		COS	R
<b>Protection from Contamination</b>			
15	<input checked="" type="radio"/> In <input checked="" type="radio"/> Out, N/A, N/O		
Food separated and protected			
16	<input checked="" type="radio"/> In <input checked="" type="radio"/> Out, N/A		
Food-contact surfaces; cleaned and sanitized			
17	<input checked="" type="radio"/> In <input checked="" type="radio"/> Out		
Proper disposition of returned, previously served, reconditioned and unsafe food			
<b>Time/Temperature Control for Safety</b>			
18	<input checked="" type="radio"/> In <input checked="" type="radio"/> Out, N/A, N/O		
Proper cooking time and temperatures			
19	<input checked="" type="radio"/> In <input checked="" type="radio"/> Out, N/A, N/O		
Proper reheating procedures for hot holding			
20	<input checked="" type="radio"/> In <input checked="" type="radio"/> Out, N/A, N/O		
Proper cooling time and temperature			
21	<input checked="" type="radio"/> In <input checked="" type="radio"/> Out, N/A, N/O		
Proper hot holding temperatures			
22	<input checked="" type="radio"/> In <input checked="" type="radio"/> Out, N/A, N/O		
Proper cold holding temperatures			
23	<input checked="" type="radio"/> In <input checked="" type="radio"/> Out, N/A, N/O		
Proper date marking and disposition			
24	<input checked="" type="radio"/> In <input checked="" type="radio"/> Out, N/A, N/O		
Time as a Public Health Control; procedures & records			
<b>Consumer Advisory</b>			
25	<input checked="" type="radio"/> In, <input checked="" type="radio"/> Out, N/A		
Consumer advisory provided for raw/undercooked food			
<b>Highly Susceptible Populations</b>			
26	<input checked="" type="radio"/> In, <input checked="" type="radio"/> Out, N/A		
Pasteurized foods used; prohibited foods not offered			
<b>Food/Color Additives and Toxic Substances</b>			
27	<input checked="" type="radio"/> In, <input checked="" type="radio"/> Out, N/A		
Food additives: approved and properly used			
28	<input checked="" type="radio"/> In, <input checked="" type="radio"/> Out, N/A		
Toxic substances properly identified, stored, and used			
<b>Conformance with Approved Procedures</b>			
29	<input checked="" type="radio"/> In, <input checked="" type="radio"/> Out, N/A		
Compliance with variance/specialized process/HACCP			

## GOOD RETAIL PRACTICES

Good Retail Practices are preventative measures to control the addition of pathogens, chemicals, and physical objects into foods.  
 Mark "X" in box if numbered item is not in compliance    Mark "X" in appropriate box for COS and/or R    **COS**=corrected on-site during inspection    **R**=repeat violation

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

Compliance Status		COS	R
<b>Proper Use of Utensils</b>			
43	<input checked="" type="radio"/> In <input checked="" type="radio"/> Out		
In-use utensils: properly stored			
44	<input checked="" type="radio"/> In <input checked="" type="radio"/> Out		
Utensils, equipment & linens: properly stored, dried, & handled			
45	<input checked="" type="radio"/> In <input checked="" type="radio"/> Out		
Single-use/single-service articles: properly stored and used			
46	<input checked="" type="radio"/> In <input checked="" type="radio"/> Out		
Gloves used properly			
<b>Utensils, Equipment and Vending</b>			
47	<input checked="" type="radio"/> In <input checked="" type="radio"/> Out		
Food and non-food contact surfaces cleanable, properly designed, constructed, and used			
48	<input checked="" type="radio"/> In <input checked="" type="radio"/> Out		
Warewashing facilities: installed, maintained, & used; test strips			
49	<input checked="" type="radio"/> In <input checked="" type="radio"/> Out		
Non-food contact surfaces clean			
<b>Physical Facilities</b>			
50	<input checked="" type="radio"/> In <input checked="" type="radio"/> Out		
Hot and cold water available; adequate pressure			
51	<input checked="" type="radio"/> In <input checked="" type="radio"/> Out		
Plumbing installed; proper backflow devices			
52	<input checked="" type="radio"/> In <input checked="" type="radio"/> Out		
Sewage and waste water properly disposed			
53	<input checked="" type="radio"/> In <input checked="" type="radio"/> Out		
Toilet facilities: properly constructed, supplied, & cleaned			
54	<input checked="" type="radio"/> In <input checked="" type="radio"/> Out		
Garbage & refuse properly disposed; facilities maintained			
55	<input checked="" type="radio"/> In <input checked="" type="radio"/> Out		
Physical facilities installed, maintained, and clean			
56	<input checked="" type="radio"/> In <input checked="" type="radio"/> Out		
Adequate ventilation and lighting; designated areas used			
<b>Employee Training</b>			
57	<input checked="" type="radio"/> In <input checked="" type="radio"/> Out		
All food employees have food handler training			
58	<input checked="" type="radio"/> In <input checked="" type="radio"/> Out		
Allergen training as required			

