

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 2	Date 5/6/14
Establishment El Paisano	License/Permit # 1000		No. of Repeat Risk Factor/Intervention Violations 0	Time In 10:45
Street Address 100 N Glenview			Permit Holder Ariel Condeba	Time Out 11:50
City/State Carbondale	ZIP Code 62901		Purpose of Inspection Monthly - 2	Risk Category I

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	Compliance Status		COS	R
Supervision				Protection from Contamination			
1	<input checked="" type="radio"/> In <input type="radio"/> Out Person in charge present, demonstrates knowledge, and performs duties			15	<input checked="" type="radio"/> In <input type="radio"/> Out <input type="radio"/> N/A <input type="radio"/> N/O Food separated and protected		
2	<input checked="" type="radio"/> In <input type="radio"/> Out <input type="radio"/> N/A Certified Food Protection Manager (CFPM)			16	<input checked="" type="radio"/> In <input type="radio"/> Out <input type="radio"/> N/A Food-contact surfaces; cleaned and sanitized		
Employee Health				Time/Temperature Control for Safety			
3	<input checked="" type="radio"/> In <input type="radio"/> Out Management, food employee and conditional employee; knowledge, responsibilities and reporting			17	<input checked="" type="radio"/> In <input type="radio"/> Out Proper disposition of returned, previously served, reconditioned and unsafe food		
4	<input checked="" type="radio"/> In <input type="radio"/> Out Proper use of restriction and exclusion			18	<input checked="" type="radio"/> In <input type="radio"/> Out <input type="radio"/> N/A <input type="radio"/> N/O Proper cooking time and temperatures		
5	<input checked="" type="radio"/> In <input type="radio"/> Out Procedures for responding to vomiting and diarrheal events			19	<input checked="" type="radio"/> In <input type="radio"/> Out <input type="radio"/> N/A <input type="radio"/> N/O Proper reheating procedures for hot holding		
Good Hygienic Practices				20	<input checked="" type="radio"/> In <input type="radio"/> Out <input type="radio"/> N/A <input type="radio"/> N/O Proper cooling time and temperature		
6	<input checked="" type="radio"/> In <input type="radio"/> Out <input type="radio"/> N/O Proper eating, tasting, drinking, or tobacco use			21	<input checked="" type="radio"/> In <input type="radio"/> Out <input type="radio"/> N/A <input type="radio"/> N/O Proper hot holding temperatures		
7	<input checked="" type="radio"/> In <input type="radio"/> Out <input type="radio"/> N/O No discharge from eyes, nose, and mouth			22	<input checked="" type="radio"/> In <input type="radio"/> Out <input type="radio"/> N/A <input type="radio"/> N/O Proper cold holding temperatures		
Preventing Contamination by Hands				23	<input checked="" type="radio"/> In <input type="radio"/> Out <input type="radio"/> N/A <input type="radio"/> N/O Proper date marking and disposition		
8	<input checked="" type="radio"/> In <input type="radio"/> Out <input type="radio"/> N/O Hands clean and properly washed			24	<input checked="" type="radio"/> In <input type="radio"/> Out <input type="radio"/> N/A <input type="radio"/> N/O Time as a Public Health Control; procedures & records		
9	<input checked="" type="radio"/> In <input type="radio"/> Out <input type="radio"/> N/A <input type="radio"/> N/O No bare hand contact with RTE food or a pre-approved alternative procedure properly allowed			Consumer Advisory			
10	<input checked="" type="radio"/> In <input type="radio"/> Out Adequate handwashing sinks properly supplied and accessible			25	<input checked="" type="radio"/> In <input type="radio"/> Out <input type="radio"/> N/A Consumer advisory provided for raw/undercooked food		
Approved Source				Highly Susceptible Populations			
11	<input checked="" type="radio"/> In <input type="radio"/> Out Food obtained from approved source			26	<input checked="" type="radio"/> In <input type="radio"/> Out <input type="radio"/> N/A Pasteurized foods used; prohibited foods not offered		
12	<input checked="" type="radio"/> In <input type="radio"/> Out <input type="radio"/> N/A <input type="radio"/> N/O Food received at proper temperature			Food/Color Additives and Toxic Substances			
13	<input checked="" type="radio"/> In <input type="radio"/> Out Food in good condition, safe, and unadulterated			27	<input checked="" type="radio"/> In <input type="radio"/> Out <input type="radio"/> N/A Food additives: approved and properly used		
14	<input checked="" type="radio"/> In <input type="radio"/> Out <input type="radio"/> N/A <input type="radio"/> N/O Required records available: shellstock tags, parasite destruction			28	<input checked="" type="radio"/> In <input type="radio"/> Out <input type="radio"/> N/A Toxic substances properly identified, stored, and used		
GOOD RETAIL PRACTICES				Conformance with Approved Procedures			
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				29	<input checked="" type="radio"/> In <input type="radio"/> Out <input type="radio"/> N/A Compliance with variance/specialized process/HACCP		

Compliance Status		COS	R	Compliance Status		COS	R
Safe Food and Water				Proper Use of Utensils			
30	Pasteurized eggs used where required			43	In-use utensils: properly stored		
31	Water and ice from approved source			44	Utensils, equipment & linens: properly stored, dried, & handled		
32	Variance obtained for specialized processing methods			45	Single-use/single-service articles: properly stored and used		
Food Temperature Control				46	Gloves used properly		
33	Proper cooling methods used; adequate equipment for temperature control			Utensils, Equipment and Vending			
34	Plant food properly cooked for hot holding			47	Food and non-food contact surfaces cleanable, properly designed, constructed, and used		
35	Approved thawing methods used			48	Warewashing facilities: installed, maintained, & used; test strips		
36	Thermometers provided & accurate			49	Non-food contact surfaces clean		
Food Identification				Physical Facilities			
37	Food properly labeled; original container			50	Hot and cold water available; adequate pressure		
Prevention of Food Contamination				51	Plumbing installed; proper backflow devices		
38	<input checked="" type="checkbox"/> Insects, rodents, and animals not present			52	Sewage and waste water properly disposed		
39	<input checked="" type="checkbox"/> Contamination prevented during food preparation, storage and display			53	Toilet facilities: properly constructed, supplied, & cleaned		
40	<input checked="" type="checkbox"/> Personal cleanliness			54	Garbage & refuse properly disposed; facilities maintained		
41	Wiping cloths: properly used and stored			55	Physical facilities installed, maintained, and clean		
42	Washing fruits and vegetables			56	Adequate ventilation and lighting; designated areas used		
Employee Training				Employee Training			
				57	All food employees have food handler training		
				58	Allergen training as required		

Food Establishment Inspection Report

Establishment: El Paisano Establishment #: 1000
 Water Supply: Public Private Waste Water System: Public Private
 Sanitizer Type: Bleach PPM: 50/100 Heat: R/A

TEMPERATURE OBSERVATIONS							
Item/Location	Temp		Item/Location	Temp		Item/Location	Temp
Walkin	38°F		True 2-Door (Sliding)	31°F			
Rice/Walkin (5/5/19)	65°F						
Make Table	39°F						
2-Door Commercial True	39°F		Steam Table / Rice	167°F			
Deli Meat Display	45°F		Steam Table / Chicken	174°F			
Deli/Pork	45°F						
Deli/Chorizo	45°F						
Deli Display Meat	41°F						
Turbo Air 2-Door	34°F						

OBSERVATIONS AND CORRECTIVE ACTIONS

Item Number	Violations cited in this report must be corrected within the time frames below.
20	Provide proper cooling procedures (2 hrs from 135°F to 70°F + 4 hrs 70°F to 41°F = Total 6 hours) for all cooked food products (Rice @ 65°F from 5/5/19) placed under refrigeration. Use ice bath to rapid cool! (5/7/19)
22	Provide proper cold holding temp (45°F or less) for all TCS product in Deli Display case. Upon inspection ambient air temp 45°F + 1 product (Pork + Chorizo) @ 45°F. (5/7/19)
439	Refrain from using bowls, as scoops, for bulk spice/dry goods throughout facility. Scoop must have handle to help eliminate possible contamination from hands. (5/5/19)
	*Note: • You must keep Temp logs daily! Failure to do so + refrigeration/hot holding are found out of temp may result in suspension of your permit last temps taken on 4/30/19. • Food manager taking test for manager's cert on 5/11/19.

CFPM Verification (name, expiration date, ID#):

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HACCP Topic: 21, 22, 23

Person in Charge (Signature): [Signature] Date: 5/6/19

Inspector (Signature): [Signature] Follow-up: Yes No (Check one) Follow-up Date: 5/7/19



JACKSON COUNTY HEALTH DEPARTMENT
RECHECK INSPECTION/NOTICE TO CORRECT

Establishment	<u>El Paisano</u>
Orig. Inspection Date	<u>5/6/19</u>
Owner/Operator	

Items below identify violations of the Jackson County Food Service Sanitation Ordinance and State Food Service Regulations that you were ordered to correct:

Item	Correction Date
<u>*Corrected Violations:</u>	
<u>21,20</u>	<u>5/7/19</u>
<u>*Note:</u>	
<u>Unit @ 40°F</u>	

Date 5/7/19

Time 4:00

Received by [Signature]

Sanitarian [Signature]

NOTICE TO CORRECT VIOLATIONS

You are hereby ordered to correct the above noted violations of the Jackson County Food Service Ordinance by _____ Failure to correct the violations within the time allotted may result in suspension and removal of your food service permit. Continued operation of the food service establishment without the permit will result in issuance of a citation and may result in a fine of up to \$500. Each day upon which such violation occurs shall constitute a separate violation.

If the above violations are not corrected within time allotted, a mandatory hearing may be scheduled at the Jackson County Health Department.

Date Issued: _____

Owner/Operator: _____

Sanitarian: _____