

# 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 <b>3</b>	Date <b>4/18/19</b>
Establishment <b>Freddy's Frozen Custards &amp; Softwares</b> License/Permit # <b>1156</b>		No. of Repeat Risk Factor/Intervention Violations <b>0</b>	Time In <b>2:10</b>
Street Address <b>500 North Giant City Road</b>		Permit Holder <b>MAM Carbondate LLC</b>	Time Out <b>3:50</b>
City/State <b>Carbondate, Illinois</b> ZIP Code <b>62901</b>		Risk Category <b>II</b>	
Purpose of Inspection <b>Compliance</b>			

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

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

# Food Establishment Inspection Report

Establishment: Freddy's Frozen Custard & Steakburgers Establishment #: 1156  
 Water Supply:  Public  Private Waste Water System:  Public  Private  
 Sanitizer Type: Quat - Semi Buckets PPM: 200 Heat: N/A  
\* Chlorine Dishmachine

TEMPERATURE OBSERVATIONS							
Item/Location	Temp		Item/Location	Temp		Item/Location	Temp
Hoshizaki 1 Door North	40.0°		1 Door Fridge <sup>Front</sup> <sub>Under</sub>	39.2°			
" " " " South	41.0°		Custard Freezer	9°			
Raw Beef Patties	38.9°						
* 2 Door Hoshizaki North	45°		Cooked Beef Patty	163°			
" " " " South	38°		* Cooked Chicken Patty	122°			
Sliced Tomatoes	38.7°		GRILLED				
Hoshizaki 1 Door Freezer	-3°						
Dessert Table	17°		Walk-In Cooler	37.80			
Custard Machine	31.9°		Walk-In Freezer	-3°			

OBSERVATIONS AND CORRECTIVE ACTIONS	
Item Number	Violations cited in this report must be corrected within the time frames below.
22	Provide 41° F or less for all PHF/TCS foods in Hoshizaki 2 Door make table (North Side). Observed at 45° F. Adjusted thermostat. Now at 40.80° F. COS
16	Provide proper concentration of sanitizer at dishmachine. Observed at 0 ppm. Chlorine bucket empty. Changed bucket, primed. Now at ~100 ppm. Rewashed pans. COS
19	Provide proper <del>re-heating</del> <sup>re-heating</sup> temperature for pre-cooked chicken patties. Observed at 122° F. Discarded. Advised to follow Freddy's procedure for re-heating product to minimum 135° F. COS
57	Provide Food Handler Training for all kitchen workers. Correct by May 1 <sup>st</sup> . * Annual Permit Granted.

CFPM Verification (name, expiration date, ID#):  
 Jamie S. Koval #178932 exp. 7/31/21  
 Hannah E. Schroeder #11961815 exp. 1/27/20

HACCP Topic: Temps (cold holding & reheating), Sanitizing

Person in Charge (Signature): J. Koval Date: 4/18/19

Inspector (Signature): John E. Williams Follow-up:  Yes  No (Check one) Follow-up Date: 5/1/19



JACKSON COUNTY HEALTH DEPARTMENT  
RECHECK INSPECTION/NOTICE TO CORRECT

Establishment	<i>Freddy's Frozen Custard &amp; Steakburgers</i>
Orig. Inspection Date	<i>4/18/19</i>
Owner/Operator	<i>Jamie S. Koval</i>

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
<i>57</i>	<i>Provide Food Handler Training for all Kitchen personnel. Have over 60% of current staff's certificates on file. Some new hires have been given until June 15<sup>th</sup> to get training completed. Will R/C after that date to ensure compliance.</i>	<i>6/17/19</i>

Date *5/3/19*

Time *10:40*

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: \_\_\_\_\_