

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 3/7/19
Establishment <i>Kentucky Fried Chicken/Taco Bell</i>		License/Permit # <i>0174</i>		No. of Repeat Risk Factor/Intervention Violations 0	Time In 10:20
Street Address <i>515 Walnut Street</i>		City/State <i>Murphysboro, Illinois</i>		Permit Holder <i>Southern Illinois Foods</i>	Risk Category <i>I</i>
City/State		ZIP Code <i>62966</i>		Purpose of Inspection <i>Routine</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 checked="" type="radio"/> Out			15	<input checked="" type="radio"/> In, <input checked="" type="radio"/> Out, N/A, N/O		
	Person in charge present, demonstrates knowledge, and performs duties			16	<input checked="" type="radio"/> In, <input checked="" type="radio"/> Out, N/A		
2	<input checked="" type="radio"/> In, <input checked="" type="radio"/> Out, N/A			17	<input checked="" type="radio"/> In, <input checked="" type="radio"/> Out		
	Certified Food Protection Manager (CFPM)				Proper disposition of returned, previously served, reconditioned and unsafe food		
Employee Health				Time/Temperature Control for Safety			
3	<input checked="" type="radio"/> In, <input checked="" type="radio"/> Out			18	<input checked="" type="radio"/> In, <input checked="" type="radio"/> Out, N/A, N/O		
	Management, food employee and conditional employee; knowledge, responsibilities and reporting			19	<input checked="" type="radio"/> In, <input checked="" type="radio"/> Out, N/A, N/O		
4	<input checked="" type="radio"/> In, <input checked="" type="radio"/> Out			20	<input checked="" type="radio"/> In, <input checked="" type="radio"/> Out, <input checked="" type="radio"/> N/A, <input checked="" type="radio"/> N/O		
	Proper use of restriction and exclusion			21	<input checked="" type="radio"/> In, <input checked="" type="radio"/> Out, N/A, N/O		
5	<input checked="" type="radio"/> In, <input checked="" type="radio"/> Out			22	<input checked="" type="radio"/> In, <input checked="" type="radio"/> Out, N/A, N/O		
	Procedures for responding to vomiting and diarrheal events			23	<input checked="" type="radio"/> In, <input checked="" type="radio"/> Out, N/A, N/O		
Good Hygienic Practices				24	<input checked="" type="radio"/> In, <input checked="" type="radio"/> Out, <input checked="" type="radio"/> N/A, <input checked="" type="radio"/> N/O		
6	<input checked="" type="radio"/> In, <input checked="" type="radio"/> Out, <input checked="" type="radio"/> N/O				Time as a Public Health Control; procedures & records		
	Proper eating, tasting, drinking, or tobacco use			Consumer Advisory			
7	<input checked="" type="radio"/> In, <input checked="" type="radio"/> Out, N/O			25	<input checked="" type="radio"/> In, <input checked="" type="radio"/> Out, <input checked="" type="radio"/> N/A		
	No discharge from eyes, nose, and mouth				Consumer advisory provided for raw/undercooked food		
Preventing Contamination by Hands				Highly Susceptible Populations			
8	<input checked="" type="radio"/> In, <input checked="" type="radio"/> Out, N/O			26	<input checked="" type="radio"/> In, <input checked="" type="radio"/> Out, <input checked="" type="radio"/> N/A		
	Hands clean and properly washed				Pasteurized foods used; prohibited foods not offered		
9	<input checked="" type="radio"/> In, <input checked="" type="radio"/> Out, N/A, N/O			Food/Color Additives and Toxic Substances			
	No bare hand contact with RTE food or a pre-approved alternative procedure properly allowed			27	<input checked="" type="radio"/> In, <input checked="" type="radio"/> Out, <input checked="" type="radio"/> N/A		
10	<input checked="" type="radio"/> In, <input checked="" type="radio"/> Out				Food additives: approved and properly used		
	Adequate handwashing sinks properly supplied and accessible			28	<input checked="" type="radio"/> In, <input checked="" type="radio"/> Out, N/A		
Approved Source					Toxic substances properly identified, stored, and used		
11	<input checked="" type="radio"/> In, <input checked="" type="radio"/> Out			Conformance with Approved Procedures			
	Food obtained from approved source			29	<input checked="" type="radio"/> In, <input checked="" type="radio"/> Out, <input checked="" type="radio"/> N/A		
12	<input checked="" type="radio"/> In, <input checked="" type="radio"/> Out, <input checked="" type="radio"/> N/A, <input checked="" type="radio"/> N/O				Compliance with variance/specialized process/HACCP		
	Food received at proper temperature			GOOD RETAIL PRACTICES			
13	<input checked="" type="radio"/> In, <input checked="" type="radio"/> Out			Good Retail Practices are preventative measures to control the addition of pathogens, chemicals, and physical objects into foods.			
	Food in good condition, safe, and unadulterated			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			
14	<input checked="" type="radio"/> In, <input checked="" type="radio"/> Out, <input checked="" type="radio"/> N/A, <input checked="" type="radio"/> N/O			Safe Food and Water			
	Required records available: shellstock tags, parasite destruction			30	Pasteurized eggs used where required		

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	<input checked="" type="checkbox"/> 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	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		<input checked="" type="checkbox"/>	53	Toilet facilities: properly constructed, supplied, & cleaned		
40	Personal cleanliness			54	Garbage & refuse properly disposed; facilities maintained		
41	Wiping cloths: properly used and stored			55	<input checked="" type="checkbox"/> 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			57	All food employees have food handler training		
58	Allergen training as required			58	Allergen training as required		

Food Establishment Inspection Report

Establishment: Kentucky Fried Chicken/Taco Bell Establishment #: 0174

Water Supply: Public Private Waste Water System: Public Private

Sanitizer Type: Quat PPM: 200 Heat: N/A

TEMPERATURE OBSERVATIONS					
Item/Location	Temp		Item/Location	Temp	
Taco Bell Line Fridge	40.6°		Front Counter Hot Hold		Henny Penny Warming Cabinet
Diced Tomatoes	40.9°		Green Beans	167.5°	2 Door Hot Hold East
Shredded Lettuce	40.3°		Mac n' cheese	169.3°	Chicken Hot Hold Front Counter
" " Cheese	37.5°		Popcorn Chicken	165.3°	
Taco Bell Hot Hold			Chicken Strips	199.1°	
Chicken chunks	154°		Brown Gravy	152.4°	
Refried Beans	152°		Defied 1 Door Fridge	34.3°	
Taco Beef	146°		Walk-In Cooler	35.3°	
Front Counter Cold Well	40.5°		Chicken w/I Cooler	40.9°	

OBSERVATIONS AND CORRECTIVE ACTIONS

Item Number	Violations cited in this report must be corrected within the time frames below.
39	Keep boxes of bulk foods covered in walk-in cooler to prevent contamination. Pic shells open. COS.
49	Clean storage shelves at front counter. Food debris. Correct by NRI.
49	Clean exterior of warming units at front counter. Grease. Correct by NRI.
49	Clean between tables at front warming units. Food debris. Correct by NRI.
55	Clean floor to wall under North breading table. Dried breadings. Correct by NRI.
55	Clean around frame of pass through window above bread. tables. Correct by NRI.
55	Clean floor under both deep fryers. Food debris, grease. Correct by NRI.

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

Ron Harper SW # 1001653223 1001653223 exp. 10/18/19	Tracey C. Leonard (has allergen) # 10016251 exp. 11/3/23	Carolyn Ellett (has allergen)
--	---	----------------------------------

HACCP Topic: Handwashing, CFPM,

Person in Charge (Signature) Ron Harper Date 3/7/19

Inspector (Signature) Amber E. Williams Follow-up: Yes No (Check one) Follow-up Date: _____

Food Establishment Inspection Report

Establishment: Kentucky Fried Chicken/Taco Bell

Establishment #: 0174

OBSERVATIONS AND CORRECTIVE ACTIONS

Item Number	Violations cited in this report must be corrected within the time frames below.
55	Clean floor to wall under dry storage racks. Grease, clutter. Correct by NRI.
55	Clean floor to wall under rack in chicken walk-in cooler. Correct by NRI.
55	Clean gap on East side of chicken cooler. Food debris, water. Correct by NRI.
49	Clean Diamond steel panel on interior of chicken walk-in cooler door. Food debris, grease. Correct by NRI.
55	Cover gap on East side of chicken walk-in cooler (floor/wall junction). Use covered baseboard to cover this gap. Correct by NRI.


Person in Charge (Signature)

3/7/19
Date


Inspector (Signature)

Follow-up: Yes No (Check one)

Follow-up Date: _____