

# 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 <input type="radio"/>	Date <u>4/11/19</u>
Establishment <u>Quin Guan Restaurant</u>		License/Permit # <u>0963</u>	No. of Repeat Risk Factor/Intervention Violations <input type="radio"/>	Time In <u>10:50</u>
Street Address <u>1285 East Main - Carbondale</u>		Permit Holder <u>Dian Mingle</u>	Risk Category <u>I</u>	Time Out <u>12:10</u>
City/State <u>Carbondale, Illinois</u>		ZIP Code <u>62901</u>	Purpose of Inspection <u>Routine</u>	

## 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 type="radio"/> Out	Person in charge present, demonstrates knowledge, and performs duties		
2	<input checked="" type="radio"/> In <input type="radio"/> Out, N/A	Certified Food Protection Manager (CFPM)		
<b>Employee Health</b>				
3	<input checked="" type="radio"/> In <input type="radio"/> Out	Management, food employee and conditional employee; knowledge, responsibilities and reporting		
4	<input checked="" type="radio"/> In <input type="radio"/> Out	Proper use of restriction and exclusion		
5	<input checked="" type="radio"/> In <input type="radio"/> Out	Procedures for responding to vomiting and diarrheal events		
<b>Good Hygienic Practices</b>				
6	<input checked="" type="radio"/> In, <input type="radio"/> Out, <input checked="" type="radio"/> N/O	Proper eating, tasting, drinking, or tobacco use		
7	<input checked="" type="radio"/> In <input 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 type="radio"/> Out, N/O	Hands clean and properly washed		
9	<input checked="" type="radio"/> In, <input 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 type="radio"/> Out	Adequate handwashing sinks properly supplied and accessible		
<b>Approved Source</b>				
11	<input checked="" type="radio"/> In <input type="radio"/> Out	Food obtained from approved source		
12	<input checked="" type="radio"/> In, <input type="radio"/> Out, N/A, <input checked="" type="radio"/> N/O	Food received at proper temperature		
13	<input checked="" type="radio"/> In <input type="radio"/> Out	Food in good condition, safe, and unadulterated		
14	<input checked="" type="radio"/> In <input 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 type="radio"/> Out, N/A, N/O	Food separated and protected		
16	<input checked="" type="radio"/> In <input type="radio"/> Out, N/A	Food-contact surfaces; cleaned and sanitized		
17	<input checked="" type="radio"/> In <input 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 type="radio"/> Out, N/A, N/O	Proper cooking time and temperatures		
19	<input checked="" type="radio"/> In <input type="radio"/> Out, N/A, N/O	Proper reheating procedures for hot holding		
20	<input checked="" type="radio"/> In, <input type="radio"/> Out, N/A, <input checked="" type="radio"/> N/O	Proper cooling time and temperature		
21	<input checked="" type="radio"/> In <input type="radio"/> Out, N/A, N/O	Proper hot holding temperatures		
22	<input checked="" type="radio"/> In <input type="radio"/> Out, N/A, N/O	Proper cold holding temperatures		
23	<input checked="" type="radio"/> In <input type="radio"/> Out, N/A, N/O	Proper date marking and disposition		
24	<input checked="" type="radio"/> In, <input type="radio"/> Out, <input checked="" type="radio"/> N/A, N/O	Time as a Public Health Control; procedures & records		
<b>Consumer Advisory</b>				
25	<input checked="" type="radio"/> In, <input type="radio"/> Out, N/A	Consumer advisory provided for raw/undercooked food		
<b>Highly Susceptible Populations</b>				
26	<input checked="" type="radio"/> In <input 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 type="radio"/> Out, N/A	Food additives: approved and properly used		
28	<input checked="" type="radio"/> In <input 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 type="radio"/> Out, <input checked="" type="radio"/> 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 type="radio"/> Out	Pasteurized eggs used where required		
31	<input checked="" type="radio"/> In <input type="radio"/> Out	Water and ice from approved source		
32	<input checked="" type="radio"/> In <input type="radio"/> Out	Variance obtained for specialized processing methods		
<b>Food Temperature Control</b>				
33	<input checked="" type="radio"/> In <input type="radio"/> Out	Proper cooling methods used; adequate equipment for temperature control		
34	<input checked="" type="radio"/> In <input type="radio"/> Out	Plant food properly cooked for hot holding		
35	<input checked="" type="radio"/> In <input type="radio"/> Out	Approved thawing methods used		
36	<input checked="" type="radio"/> In <input type="radio"/> Out	Thermometers provided & accurate		
<b>Food Identification</b>				
37	<input checked="" type="radio"/> In <input type="radio"/> Out	Food properly labeled; original container		
<b>Prevention of Food Contamination</b>				
38	<input checked="" type="radio"/> In <input type="radio"/> Out	Insects, rodents, and animals not present		
39	<input checked="" type="radio"/> In <input type="radio"/> Out	Contamination prevented during food preparation, storage and display		<input checked="" type="checkbox"/>
40	<input checked="" type="radio"/> In <input type="radio"/> Out	Personal cleanliness		
41	<input checked="" type="radio"/> In <input type="radio"/> Out	Wiping cloths: properly used and stored		
42	<input checked="" type="radio"/> In <input type="radio"/> Out	Washing fruits and vegetables		

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

