

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 3	Date 6/2/21
Establishment Italian Village		License/Permit # 1161		No. of Repeat Risk Factor/Intervention Violations 0	Time In 2:20
Street Address 405 South Washington		City/State Carbondale, IL		Permit Holder Brian Donahue	Time Out 3:50
City/State Carbondale, IL		ZIP Code 62901		Purpose of Inspection Routine	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	Description	COS	R	Compliance Status	Description	COS	R
Supervision							
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							
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			Time/Temperature Control for Safety			
5	<input checked="" type="radio"/> In, <input type="radio"/> Out Procedures for responding to vomiting and diarrheal events			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		
Good Hygienic Practices							
6	<input checked="" type="radio"/> In, <input type="radio"/> Out, <input type="radio"/> N/O Proper eating, tasting, drinking, or tobacco use			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		
7	<input checked="" type="radio"/> In, <input type="radio"/> Out, <input type="radio"/> N/O No discharge from eyes, nose, and mouth			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		X
Preventing Contamination by Hands							
8	<input checked="" type="radio"/> In, <input type="radio"/> Out, <input type="radio"/> N/O Hands clean and properly washed			21	<input checked="" type="radio"/> In, <input type="radio"/> Out, <input type="radio"/> N/A, <input type="radio"/> N/O Proper hot holding temperatures		
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			22	<input checked="" type="radio"/> In, <input type="radio"/> Out, <input type="radio"/> N/A, <input type="radio"/> N/O Proper cold holding temperatures		X
10	<input checked="" type="radio"/> In, <input type="radio"/> Out Adequate handwashing sinks properly supplied and accessible			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		X
Approved Source							
11	<input checked="" type="radio"/> In, <input type="radio"/> Out Food obtained from approved source			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		
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			Consumer Advisory			
13	<input checked="" type="radio"/> In, <input type="radio"/> Out Food in good condition, safe, and unadulterated			25	<input checked="" type="radio"/> In, <input type="radio"/> Out, <input type="radio"/> N/A Consumer advisory provided for raw/undercooked food		
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			Highly Susceptible Populations			
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	Description	COS	R	Compliance Status	Description	COS	R
Safe Food and Water							
30	Pasteurized eggs used where required			Proper Use of Utensils			
31	Water and ice from approved source			43	In-use utensils: properly stored		
32	Variance obtained for specialized processing methods			44	Utensils, equipment & linens: properly stored, dried, & handled		
Food Temperature Control							
33	Proper cooling methods used; adequate equipment for temperature control			45	Single-use/single-service articles: properly stored and used		
34	Plant food properly cooked for hot holding			46	Gloves used properly		
35	Approved thawing methods used			Utensils, Equipment and Vending			
36	Thermometers provided & accurate			47	Food and non-food contact surfaces cleanable, properly designed, constructed, and used		
Food Identification							
37	Food properly labeled; original container			48	Warewashing facilities: installed, maintained, & used; test strips		
Prevention of Food Contamination							
38	Insects, rodents, and animals not present			49	<input checked="" type="radio"/> X Non-food contact surfaces clean		
39	<input checked="" type="radio"/> X Contamination prevented during food preparation, storage and display			Physical Facilities			
40	Personal cleanliness			50	Hot and cold water available; adequate pressure		
41	Wiping cloths: properly used and stored			51	Plumbing installed; proper backflow devices		
42	Washing fruits and vegetables			52	Sewage and waste water properly disposed		
Employee Training							
57	All food employees have food handler training			53	Toilet facilities: properly constructed, supplied, & cleaned		
58	Allergen training as required			54	Garbage & refuse properly disposed; facilities maintained		
				55	<input checked="" type="radio"/> X Physical facilities installed, maintained, and clean		
				56	Adequate ventilation and lighting; designated areas used		

Food Establishment Inspection Report

Establishment: Italian Village Establishment #: 1161

Water Supply: Public Private Waste Water System: Public Private

Sanitizer Type: Chlorine PPM: 100



TEMPERATURE OBSERVATIONS					
Item/Location	Temp	Item/Location	Temp	Item/Location	Temp
Kitchen Walkin	36	Ice Cream	34	Bottom Walkin	34
-meat Sauce	37			-Spaghetti noodles	48
Salad Bar		Keg Cooler	38	Hot hold unit	
-Eggs RT	56	Pizza Make		-Italian beef	149
-Eggs R.B	45	-Sausage	27	-meat Sauce 1	161
-Cheese	43	-Cheese	36	" 2	156
-Eggs LT	48	Cola Cooler	39	" 3	153

OBSERVATIONS AND CORRECTIVE ACTIONS

Item Number	Violations cited in this report must be corrected within the time frames below.	Correct By
20	Provide proper cooling procedures for all cooked/cooled TCS items (noodles) in walkin. Spaghetti noodles in walkin @ 48°F. These noodles were placed in walkin roughly ~ 8:30am. Process is, Cook noodles & drain them let soak in cold water / ice bath, then place in walkin with lid off to cool. See notes for cooling process. Allowed facility to ice bath noodles.	COS
22	Provide proper cold holding temperatures @ 41°F or below for all TCS items in Salad bar. Upon inspection, pre-portioned soufflé cups of eggs/cheeses, ect. above 41°F. Facility discarded product above 45°F & is going to put less product in bar & label w/ 4 hr discard times. Also going to open salad bar back to normal & going to eliminate this issue all together.	COS
23	Provide proper 7 day discard labels for all pre-cooked/	

CFPM Verification (name, expiration date, ID#):
Brian Donahue
#2009299 exp 2023
 HACCP Topic: 20, 22, 16, 24, 23

[Signature] Person in Charge (Signature) 6/2/21 Date

[Signature] Inspector (Signature) Follow-up: Yes No (Check one) Follow-up Date: _____

Food Establishment Inspection Report

Establishment: Italian Village

Establishment #: 161

OBSERVATIONS AND CORRECTIVE ACTIONS

Item Number	Violations cited in this report must be corrected within the time frames below.
	(Continued)
	Frozen & thawed / Opened Items under refrigeration.
	3 Containers of wings & grilled chicken with no labels.
	Once it's opened & thawed from original package, it must have a 7 day DIC date. Allowed employee/mgt to label with prep date of Saturday. Everything else in facility with proper labeling. Next time, products will be discarded if no label is present.
39	Clean container on shelf that sits on table in kitchen where measuring cups are stored. Bottom of container has food debris. NRI
49	Clean shelving in kitchen walkin. Mold/mildew noted especially on green shelving. NRI
49	Clean later cooler where lid/seal closes. Food debris noted. (behind hot hold unit) NRI
49	Replace foil / Clean under deli wrap machine. Food debris noted. NRI
55	Clean vent above Hot hold unit. Dust noted. NRI
	<u>NOTES</u>
	Cooling is as follows: 2hrs to get from 135 to 70°F & an additional 4hrs to get from 70°F to under 41°F. If doing an ice bath, product should get cooled in plenty of time. Monitor any/all cooked/cooled products to be sure this process is being done correctly.
	You may utilize your Salad bar. Ensure utensils are being changed out / washed a minimum of 1x an hr.

B. Butler
Person in Charge (Signature)

6/2/21
Date

Dayla Beasley
Inspector (Signature)

Follow-up: Yes No (Check one)

Follow-up Date: _____