

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	10	Date	6/18/21		
Establishment <u>Letter's Crossing at Stone Creek</u>		License/Permit # <u>1038</u>		No. of Repeat Risk Factor/Intervention Violations	0	Time In	11:00 AM		
Street Address <u>503 Stone Creek Dr</u>		City/State <u>Marion, IL</u>		Permit Holder	<u>Jason Chrzan</u>		Time Out	1:40 PM	
City/State <u>Marion, IL</u>		ZIP Code <u>62958</u>		Purpose of Inspection	<u>Routine</u>			Risk Category	<u>I</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	Compliance Status		COS	R
Supervision							
1	<input checked="" type="radio"/> In <input checked="" type="radio"/> Out			Person in charge present, demonstrates knowledge, and performs duties			
2	<input checked="" type="radio"/> In <input checked="" type="radio"/> Out <input type="radio"/> N/A			Certified Food Protection Manager (CFPM)			
Employee Health							
3	<input checked="" type="radio"/> In <input checked="" type="radio"/> Out			Management, food employee and conditional employee; knowledge, responsibilities and reporting			
4	<input checked="" type="radio"/> In <input checked="" type="radio"/> Out			Proper use of restriction and exclusion			
5	<input checked="" type="radio"/> In <input checked="" type="radio"/> Out			Procedures for responding to vomiting and diarrheal events			
Good Hygienic Practices							
6	<input checked="" type="radio"/> In <input checked="" type="radio"/> Out <input type="radio"/> N/O			Proper eating, tasting, drinking, or tobacco use			
7	<input checked="" type="radio"/> In <input checked="" type="radio"/> Out <input type="radio"/> N/O			No discharge from eyes, nose, and mouth			
Preventing Contamination by Hands							
8	<input checked="" type="radio"/> In <input checked="" type="radio"/> Out <input type="radio"/> N/O			Hands clean and properly washed			
9	<input checked="" type="radio"/> In <input checked="" 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			
10	<input checked="" type="radio"/> In <input checked="" type="radio"/> Out			Adequate handwashing sinks properly supplied and accessible			
Approved Source							
11	<input checked="" type="radio"/> In <input checked="" type="radio"/> Out			Food obtained from approved source			
12	<input checked="" type="radio"/> In <input checked="" type="radio"/> Out <input type="radio"/> N/A <input type="radio"/> N/O			Food received at proper temperature			
13	<input checked="" type="radio"/> In <input checked="" type="radio"/> Out			Food in good condition, safe, and unadulterated			
14	<input checked="" type="radio"/> In <input checked="" type="radio"/> Out <input type="radio"/> N/A <input type="radio"/> N/O			Required records available: shellstock tags, parasite destruction			
Protection from Contamination							
15	<input checked="" type="radio"/> In <input checked="" type="radio"/> Out <input type="radio"/> N/A <input type="radio"/> N/O			Food separated and protected			
16	<input checked="" type="radio"/> In <input checked="" type="radio"/> Out <input type="radio"/> N/A			Food-contact surfaces; cleaned and sanitized			X
17	<input checked="" type="radio"/> In <input checked="" type="radio"/> Out			Proper disposition of returned, previously served, reconditioned and unsafe food			
Time/Temperature Control for Safety							
18	<input checked="" type="radio"/> In <input checked="" type="radio"/> Out <input type="radio"/> N/A <input type="radio"/> N/O			Proper cooking time and temperatures			
19	<input checked="" type="radio"/> In <input checked="" type="radio"/> Out <input type="radio"/> N/A <input type="radio"/> N/O			Proper reheating procedures for hot holding			
20	<input checked="" type="radio"/> In <input checked="" type="radio"/> Out <input type="radio"/> N/A <input type="radio"/> N/O			Proper cooling time and temperature			
21	<input checked="" type="radio"/> In <input checked="" type="radio"/> Out <input type="radio"/> N/A <input type="radio"/> N/O			Proper hot holding temperatures			
22	<input checked="" type="radio"/> In <input checked="" type="radio"/> Out <input type="radio"/> N/A <input type="radio"/> N/O			Proper cold holding temperatures			
23	<input checked="" type="radio"/> In <input checked="" type="radio"/> Out <input type="radio"/> N/A <input type="radio"/> N/O			Proper date marking and disposition			
24	<input checked="" type="radio"/> In <input checked="" type="radio"/> Out <input type="radio"/> N/A <input type="radio"/> N/O			Time as a Public Health Control; procedures & records			
Consumer Advisory							
25	<input checked="" type="radio"/> In <input checked="" type="radio"/> Out <input type="radio"/> N/A <input type="radio"/> N/O			Consumer advisory provided for raw/undercooked food			
Highly Susceptible Populations							
26	<input checked="" type="radio"/> In <input checked="" type="radio"/> Out <input type="radio"/> N/A			Pasteurized foods used; prohibited foods not offered			
Food/Color Additives and Toxic Substances							
27	<input checked="" type="radio"/> In <input checked="" type="radio"/> Out <input type="radio"/> N/A			Food additives: approved and properly used			
28	<input checked="" type="radio"/> In <input checked="" type="radio"/> Out <input type="radio"/> N/A			Toxic substances properly identified, stored, and used			
Conformance with Approved Procedures							
29	<input checked="" type="radio"/> In <input checked="" type="radio"/> Out <input 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	Compliance Status		COS	R
Safe Food and Water							
30	<input checked="" type="checkbox"/>			Pasteurized eggs used where required			
31	<input checked="" type="checkbox"/>			Water and ice from approved source			
32	<input checked="" type="checkbox"/>			Variance obtained for specialized processing methods			
Food Temperature Control							
33	<input checked="" type="checkbox"/>			Proper cooling methods used; adequate equipment for temperature control			
34	<input checked="" type="checkbox"/>			Plant food properly cooked for hot holding			
35	<input checked="" type="checkbox"/>			Approved thawing methods used			
36	<input checked="" type="checkbox"/>			Thermometers provided & accurate			
Food Identification							
37	<input checked="" type="checkbox"/>			Food properly labeled; original container			
Prevention of Food Contamination							
38	<input checked="" type="checkbox"/>			Insects, rodents, and animals not present			
39	<input checked="" type="checkbox"/>			Contamination prevented during food preparation, storage and display			
40	<input checked="" type="checkbox"/>			Personal cleanliness			
41	<input checked="" type="checkbox"/>			Wiping cloths: properly used and stored			
42	<input checked="" type="checkbox"/>			Washing fruits and vegetables			
Proper Use of Utensils							
43	<input checked="" type="checkbox"/>			In-use utensils: properly stored			
44	<input checked="" type="checkbox"/>			Utensils, equipment & linens: properly stored, dried, & handled			
45	<input checked="" type="checkbox"/>			Single-use/single-service articles: properly stored and used			
46	<input checked="" type="checkbox"/>			Gloves used properly			
Utensils, Equipment and Vending							
47	<input checked="" type="checkbox"/>			Food and non-food contact surfaces cleanable, properly designed, constructed, and used			
48	<input checked="" type="checkbox"/>			Warewashing facilities: installed, maintained, & used; test strips			
49	<input checked="" type="checkbox"/>			Non-food contact surfaces clean			
Physical Facilities							
50	<input checked="" type="checkbox"/>			Hot and cold water available; adequate pressure			X
51	<input checked="" type="checkbox"/>			Plumbing installed; proper backflow devices			
52	<input checked="" type="checkbox"/>			Sewage and waste water properly disposed			
53	<input checked="" type="checkbox"/>			Toilet facilities: properly constructed, supplied, & cleaned			
54	<input checked="" type="checkbox"/>			Garbage & refuse properly disposed; facilities maintained			
55	<input checked="" type="checkbox"/>			Physical facilities installed, maintained, and clean			
56	<input checked="" type="checkbox"/>			Adequate ventilation and lighting; designated areas used			
Employee Training							
57	<input checked="" type="checkbox"/>			All food employees have food handler training			
58	<input checked="" type="checkbox"/>			Allergen training as required			

Food Establishment Inspection Report

Establishment: Keller's Crossing at Stone Creek Establishment #: 1038

Water Supply: Public Private Waste Water System: Public Private

Sanitizer Type: Chlorine PPM: > 500 ppm Heat: _____



TEMPERATURE OBSERVATIONS

Item/Location	Temp	Item/Location	Temp	Item/Location	Temp
Walk-in cooler	38°	Hot hold Burger	156	hot water @ sink (3 well)	102°
Pepsi cooler (@ bar)	40°	Hot hold Brat	142		
Make table (3-door)*	N/A				
2-door make table (grill)		COOKING temp of hot dog (to serve)	90°		
• AA upper	45°				
• AA lower	43°				
(* 3-door make table not in use)					

OBSERVATIONS AND CORRECTIVE ACTIONS

Item Number	Violations cited in this report must be corrected within the time frames below.	Correct By	
1	Provide person in charge (PIC) that demonstrates knowledge of safe food handling practices.	Call to set-up	
2	Provide Certified Food Protection manager (CFPM) on site any time food is being prepared or served.	↓	
8/10	Provide accessible handwashing sink at gdfers grill any time food is being prepared / served. Upon inspection employee performing the following tasks: handling money, handling raw food, cellphone use, which requires handwashing before putting new gloves on. See notes.		
15	Refrain from utilizing the same utensils to cook and serve raw and ready to eat (RTE) products. Upon inspection employee only hand one set of utensils. This allows the potential for cross contamination.		
16/50	Provide adequate hot water (120°F for 3-comp sink / dish machine) to facilitate proper wash, rinse, sanitize procedures. Upon inspection hot water @ 102°, hot water just replaced, this unit must be adjusted to allow for 120°F water at all times.		COS

CFPM Verification (name, expiration date, ID#):
None at time

HACCP Topic: 1, 2, 8, 10, 15, 16, 19, 22, 23, 28

Person in Charge (Signature) [Signature] Date 6-18-21

Inspector (Signature) [Signature] Follow-up: Yes No (Check one) Follow-up Date: Call to set-up time

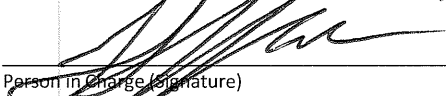
Food Establishment Inspection Report

Establishment: Keller's Crossing at Stone Creek

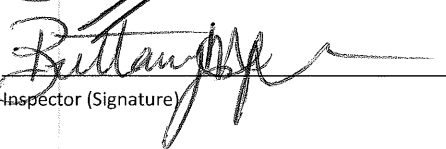
Establishment #: 1038

OBSERVATIONS AND CORRECTIVE ACTIONS

Item Number	Violations cited in this report must be corrected within the time frames below.	Correct By
16	Provide proper wash, rinse, & sanitize procedures for all in-use food contact utensils. Upon inspection employee utilizes same set of utensils from 10 am - 3 pm. These items must be wash, rinsed, and sanitized every 4 hrs.	Call to Set up
16/41	Refrain from using soiled wiping cloth to wipe down food contact surfaces. These items must be stored in sanitizer bucket at proper sanitizer concentration between uses.	
19	Provide proper reheating cooking temperature for pre-cooked/pre-packaged TCS products. Upon inspection cooked hot dog (about to be served) @ 90°F. These items must be reheated to a minimum of 135°F before serving. Employee had no thermometer present to verify temperature before serving.	
22	Provide proper cold holding temperature (41°F or below) for all refrigeration units that hold TCS products. Upon inspection, make table at outdoor grill @ 43-45°F. See notes.	
23	Provide 7-day discard labeling for all cooked/cooled or opened pre-packaged TCS items. Upon inspection ground beef, pre-made salads, mc wieners, and shredded lettuce all without labels. These must be labeled after opening/cooking and be discarded after 7 days.	
28	Provide proper sanitizer concentration throughout kitchen/grill area. Upon inspection chlorox wipes being utilized and bleach/water spray bottle @ > 500ppm.	
38	Provide screen / full enclosure for grill area outside. This area must be completely screened in to prevent entrance of pests.	
39	Refrain from storing raw beef above RTE products (cheese) and water bottles. These items must be stored below all RTE products.	
49	Clean 4-burner stove top/and back splash. Grease / carbon build-up noted.	
49	Clean table top that flat top sits on. Grease / food debris noted.	
55	Clean rangehood / filters and stainless wall behind cookline. Grease splash / build-up noted.	
55	Clean floor under all cookline equipment. Food debris / grease noted.	
55	Clean golfers grill area. This area has to be well maintained & cleaned / sealed to prevent environmental contamination. Cobwebs, dirt / mud & water noted. See notes on page 4. →	✓


Person in Charge (Signature)

6-18-21
Date


Inspector (Signature)

Follow-up: Yes No (Check one)

Follow-up Date: Call to set-up time

Food Establishment Inspection Report

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BNU

Establishment: Keller's Crossing at Stone Creek

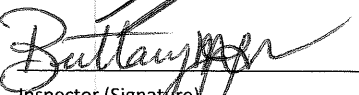
Establishment #: 1038

OBSERVATIONS AND CORRECTIVE ACTIONS

Item Number	Violations cited in this report must be corrected within the time frames below.
	<p><u>Notes:</u></p> <ul style="list-style-type: none"> • Provide more than one CFPM for this facility. One must be present at all times food is being prepared or served! • Upon speaking to the previous sanitarian who inspected this facility, he indicated that the "golfers grill" was going to be used on a very temporary basis. Currently it appears the grill is ^(BNU) being utilized 3 days a week minimum, and has become a more permanent fixture which requires it to meet the minimum requirements of the food code as follows: <ul style="list-style-type: none"> • permanent hand sink/fixture with hot & cold water must be installed by an Illinois licensed plumber to allow employees at grill area to properly wash hands. • The entirety of the "golfers grill" must be enclosed/ screened in to prevent the entrance of pests and other potential contaminants. • The base of the structure must be sealed to prevent entrance of environmental contaminants (water, dirt/mud). • a service window with screened door must be provided at minimum. • Unit in outside grill must be turned on well in advance and temperature must be verified to be at 41°F or below before storing TCS products in unit. • This facility must utilize 7-day discard labels on all TCS food products / opened pre-package TCS products. If at any future field visit/ inspection TCS foods are found to be unlabeled <u>all</u> products will be discarded. • left copies of consumer advisory, notice to consumer signage, Food service education list, Norovirus clean-up procedure, Form I-B. with Jason Chrzan. • Golfers grill must close cease operations until minimums requirements above are met. Please call me to schedule reinspection for facility.


Person in Charge (Signature)

6-18-21
Date


Inspector (Signature)

Follow-up: Yes No (Check one)

Follow-up Date: Call to set up time