

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	1	Date	8/9/2021	
Establishment		License/Permit #		No. of Repeat Risk Factor/Intervention Violations	0	Time In	12:20pm	
Street Address		City/State		Permit Holder	Dillon Rushing			
City/State		ZIP Code		Purpose of Inspection	Routine			
Murphysboro, IL		62966		Risk Category				II

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
Supervision		
1	(In) Out	Person in charge present, demonstrates knowledge, and performs duties
2	(In) Out, N/A	Certified Food Protection Manager (CFPM)
Employee Health		
3	(In) Out	Management, food employee and conditional employee; knowledge, responsibilities and reporting
4	(In) Out	Proper use of restriction and exclusion
5	(In) Out	Procedures for responding to vomiting and diarrheal events
Good Hygienic Practices		
6	(In) Out, N/O	Proper eating, tasting, drinking, or tobacco use
7	(In) Out, N/O	No discharge from eyes, nose, and mouth
Preventing Contamination by Hands		
8	(In) Out, N/O	Hands clean and properly washed
9	In, Out, N/A, N/O	No bare hand contact with RTE food or a pre-approved alternative procedure properly allowed
10	(In) Out	Adequate handwashing sinks properly supplied and accessible
Approved Source		
11	(In) Out	Food obtained from approved source
12	In, Out, N/A, N/O	Food received at proper temperature
13	(In) Out	Food in good condition, safe, and unadulterated
14	In, Out, N/A, N/O	Required records available: shellstock tags, parasite destruction

Compliance Status	COS	R
Protection from Contamination		
15	(In) Out, N/A, N/O	Food separated and protected
16	(In) Out, N/A	Food-contact surfaces; cleaned and sanitized
17	(In) Out	Proper disposition of returned, previously served, reconditioned and unsafe food
Time/Temperature Control for Safety		
18	In, Out, N/A, N/O	Proper cooking time and temperatures
19	In, Out, N/A, N/O	Proper reheating procedures for hot holding
20	In, Out, N/A, N/O	Proper cooling time and temperature
21	(In) Out, N/A, N/O	Proper hot holding temperatures
22	(In) Out, N/A, N/O	Proper cold holding temperatures
23	In, Out, N/A, N/O	Proper date marking and disposition
24	In, Out, N/A, N/O	Time as a Public Health Control; procedures & records
Consumer Advisory		
25	In, Out, N/A	Consumer advisory provided for raw/undercooked food
Highly Susceptible Populations		
26	In, Out, N/A	Pasteurized foods used; prohibited foods not offered
Food/Color Additives and Toxic Substances		
27	In, Out, N/A	Food additives: approved and properly used
28	(In) Out, N/A	Toxic substances properly identified, stored, and used
Conformance with Approved Procedures		
29	In, Out, 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
Safe Food and Water		
30		Pasteurized eggs used where required
31		Water and ice from approved source
32		Variance obtained for specialized processing methods
Food Temperature Control		
33		Proper cooling methods used; adequate equipment for temperature control
34		Plant food properly cooked for hot holding
35		Approved thawing methods used
36		Thermometers provided & accurate
Food Identification		
37		Food properly labeled; original container
Prevention of Food Contamination		
38		Insects, rodents, and animals not present
39		Contamination prevented during food preparation, storage and display
40		Personal cleanliness
41		Wiping cloths: properly used and stored
42		Washing fruits and vegetables

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

Food Establishment Inspection Report

Establishment: Martel's Pizza Establishment #: 1075

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	Item/Location	Temp
Hot hold	145°				
Make table (salad)	41°				
° bacon	40°				
° diced toms	41°				
Large make table	29				
° diced tom	31				

OBSERVATIONS AND CORRECTIVE ACTIONS		
Item Number	Violations cited in this report must be corrected within the time frames below.	Correct By
9	Educate employees on proper handling of ready-to-eat (RTE) foods. Upon inspection employee noted handling sandwich with barehands while cutting in half. Employees need to utilize utensils, disposable food papers, or gloves when handling RTE foods.	COS

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

HACCP Topic: 2, 16, 8/9, 21, 22

Person in Charge (Signature) [Signature] Date 8/9/2021

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