

# 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 <b>2</b>	Date <b>5/25/2021</b>
Establishment <b>Quatros</b>		License/Permit # <b>265</b>	No. of Repeat Risk Factor/Intervention Violations <b>1</b>	Time In <b>1:30pm</b>
Street Address <b>218 W. Freeman</b>		City/State <b>Carbondale, IL</b>	Permit Holder <b>Steve Payne</b>	Time Out <b>2:20pm</b>
City/State <b>Carbondale, IL</b>		ZIP Code <b>62901</b>	Purpose of Inspection <b>Routine</b>	Risk Category <b>I</b>

## 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
<b>Supervision</b>							
1	<input checked="" type="radio"/> In <input type="radio"/> Out			15	<input checked="" type="radio"/> In <input type="radio"/> Out, N/A, N/O		
Person in charge present, demonstrates knowledge, and performs duties				Food separated and protected			
2	<input checked="" type="radio"/> In <input type="radio"/> Out, N/A			16	<input type="radio"/> In, <input checked="" type="radio"/> Out, N/A		
Certified Food Protection Manager (CFPM)				Food-contact surfaces; cleaned and sanitized			
<b>Employee Health</b>							
3	<input checked="" type="radio"/> In <input type="radio"/> Out			17	<input checked="" type="radio"/> In <input type="radio"/> Out		
Management, food employee and conditional employee; knowledge, responsibilities and reporting				Proper disposition of returned, previously served, reconditioned and unsafe food			
4	<input checked="" type="radio"/> In <input type="radio"/> Out			<b>Time/Temperature Control for Safety</b>			
Proper use of restriction and exclusion				18	<input type="radio"/> In, <input type="radio"/> Out, N/A, <input checked="" type="radio"/> N/O		
5	<input checked="" type="radio"/> In <input type="radio"/> Out			Proper cooking time and temperatures			
Procedures for responding to vomiting and diarrheal events				19	<input type="radio"/> In, <input type="radio"/> Out, N/A, <input checked="" type="radio"/> N/O		
<b>Good Hygienic Practices</b>							
6	<input checked="" type="radio"/> In <input type="radio"/> Out, N/O			Proper reheating procedures for hot holding			
Proper eating, tasting, drinking, or tobacco use				20	<input type="radio"/> In, <input type="radio"/> Out, N/A, <input checked="" type="radio"/> N/O		
7	<input checked="" type="radio"/> In <input type="radio"/> Out, N/O			Proper cooling time and temperature			
No discharge from eyes, nose, and mouth				21	<input checked="" type="radio"/> In <input type="radio"/> Out, N/A, N/O		
<b>Preventing Contamination by Hands</b>							
8	<input checked="" type="radio"/> In <input type="radio"/> Out, N/O			Proper hot holding temperatures			
Hands clean and properly washed				22	<input type="radio"/> In, <input checked="" type="radio"/> Out, N/A, N/O		<input checked="" type="checkbox"/>
9	<input checked="" type="radio"/> In <input type="radio"/> Out, N/A, N/O			Proper cold holding temperatures			
No bare hand contact with RTE food or a pre-approved alternative procedure properly allowed				23	<input checked="" type="radio"/> In, <input type="radio"/> Out, N/A, N/O		
10	<input checked="" type="radio"/> In <input type="radio"/> Out			Proper date marking and disposition			
Adequate handwashing sinks properly supplied and accessible				24	<input type="radio"/> In, <input type="radio"/> Out, <input checked="" type="radio"/> N/A, N/O		
<b>Approved Source</b>							
11	<input checked="" type="radio"/> In <input type="radio"/> Out			Time as a Public Health Control; procedures & records			
Food obtained from approved source				<b>Consumer Advisory</b>			
12	<input type="radio"/> In, <input type="radio"/> Out, N/A, <input checked="" type="radio"/> N/O			25	<input type="radio"/> In, <input type="radio"/> Out, <input checked="" type="radio"/> N/A		
Food received at proper temperature				Consumer advisory provided for raw/undercooked food			
13	<input checked="" type="radio"/> In <input type="radio"/> Out			<b>Highly Susceptible Populations</b>			
Food in good condition, safe, and unadulterated				26	<input type="radio"/> In, <input type="radio"/> Out, <input checked="" type="radio"/> N/A		
14	<input type="radio"/> In, <input type="radio"/> Out, <input checked="" type="radio"/> N/A, N/O			Pasteurized foods used; prohibited foods not offered			
Required records available: shellstock tags, parasite destruction				<b>Food/Color Additives and Toxic Substances</b>			
<b>GOOD RETAIL PRACTICES</b>							
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	Pasteurized eggs used where required		
31	Water and ice from approved source		
32	Variance obtained for specialized processing methods		
<b>Food Temperature Control</b>			
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		
<b>Food Identification</b>			
37	Food properly labeled; original container		
<b>Prevention of Food Contamination</b>			
38	Insects, rodents, and animals not present		
39	Contamination prevented during food preparation, storage and display		
40	<input checked="" type="checkbox"/> Personal cleanliness		<input checked="" type="checkbox"/>
41	Wiping cloths: properly used and stored		
42	Washing fruits and vegetables		

Compliance Status		COS	R
<b>Proper Use of Utensils</b>			
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		
<b>Utensils, Equipment and Vending</b>			
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		
<b>Physical Facilities</b>			
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		
<b>Employee Training</b>			
57	All food employees have food handler training		
58	Allergen training as required		

# Food Establishment Inspection Report

Establishment: Quatno's Establishment #: 2105

Water Supply:  Public  Private Waste Water System:  Public  Private

Sanitizer Type: Quat / Chlorine (dish machine) PPM: 0 / 50 Heat: N/A

TEMPERATURE OBSERVATIONS					
Item/Location	Temp	Item/Location	Temp	Item/Location	Temp
Pizza make Table AA	41°	Walk-in	38°		
• Raw Burger	38°				
• Diced tomatoes	34°				
• Diced chicken	34°				
• Cheese	45°				
aujois hot hold	154°				
Salad make table AA	40°				
• Lower AA	38°				
Beer walk-in	36°				

### OBSERVATIONS AND CORRECTIVE ACTIONS

Item Number	Violations cited in this report must be corrected within the time frames below.	Correct By
110	Provide proper sanitizer concentration (Quat = manufacturer label) for all sani-buckets throughout kitchen. Upon inspection sani-bucket @ waitress area @ 0, dispenser @ 0. Dispenser must be repaired & verified by health dept. before it can be placed back in-use.	call me for recheck
22*	Provide proper cold holding temperature (41°F or below) for all TCS products. Upon inspection cheese in make table by pizza oven @ 45°, no lids for make table reach-in top. Please see notes.	COS
40*	Provide effective hair restraint for all employees in kitchen area. Upon inspection employee not wearing hair net or ball cap only head band.	COS
<u>Note</u>		
* This facility must keep a sanitizer log & verify that both the dish machine & Quat dispenser are working.		
*		

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

8 on file

HACCP Topic: 2, 110, 22

Person in Charge (Signature): Alex Payne Date: 5/25/2021

Inspector (Signature): [Signature]

Follow-up:  Yes  No (Check one) Follow-up Date: call for recheck