

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	0	Date	11/18/21
Establishment		License/Permit #	No. of Repeat Risk Factor/Intervention Violations	0	Time In	10:30
Street Address			Permit Holder	Jade Jackson	Time Out	11:30
City/State		ZIP Code	Purpose of Inspection		Risk Category	II
Carbondale		62901	Routine			

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				Protection from Contamination			
1	<input checked="" type="radio"/> In <input type="radio"/> Out			15	<input checked="" type="radio"/> In <input type="radio"/> Out <input type="radio"/> N/A <input type="radio"/> 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 <input type="radio"/> N/A			16	<input checked="" type="radio"/> In <input type="radio"/> Out <input type="radio"/> N/A		
	Certified Food Protection Manager (CFPM)				Food-contact surfaces; cleaned and sanitized		
Employee Health				17	<input checked="" type="radio"/> In <input type="radio"/> Out		
3	<input checked="" type="radio"/> In <input type="radio"/> Out				Proper disposition of returned, previously served, reconditioned and unsafe food		
	Management, food employee and conditional employee; knowledge, responsibilities and reporting			Time/Temperature Control for Safety			
4	<input checked="" type="radio"/> In <input type="radio"/> Out			18	<input checked="" type="radio"/> In <input type="radio"/> Out <input type="radio"/> N/A <input type="radio"/> N/O		
	Proper use of restriction and exclusion				Proper cooking time and temperatures		
5	<input checked="" type="radio"/> In <input type="radio"/> Out			19	<input checked="" type="radio"/> In <input type="radio"/> Out <input type="radio"/> N/A <input type="radio"/> N/O		
	Procedures for responding to vomiting and diarrheal events				Proper reheating procedures for hot holding		
Good Hygienic Practices				20	<input checked="" type="radio"/> In <input type="radio"/> Out <input type="radio"/> N/A <input type="radio"/> N/O		
6	<input checked="" type="radio"/> In <input type="radio"/> Out <input type="radio"/> N/O				Proper cooling time and temperature		
	Proper eating, tasting, drinking, or tobacco use			21	<input checked="" type="radio"/> In <input type="radio"/> Out <input type="radio"/> N/A <input type="radio"/> N/O		
7	<input checked="" type="radio"/> In <input type="radio"/> Out <input type="radio"/> N/O				Proper hot holding temperatures		
	No discharge from eyes, nose, and mouth			22	<input checked="" type="radio"/> In <input type="radio"/> Out <input type="radio"/> N/A <input type="radio"/> N/O		
Preventing Contamination by Hands					Proper cold holding temperatures		
8	<input checked="" type="radio"/> In <input type="radio"/> Out <input type="radio"/> N/O			23	<input checked="" type="radio"/> In <input type="radio"/> Out <input type="radio"/> N/A <input type="radio"/> N/O		
	Hands clean and properly washed				Proper date marking and disposition		
9	<input checked="" type="radio"/> In <input type="radio"/> Out <input type="radio"/> N/A <input type="radio"/> N/O			24	<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				Time as a Public Health Control; procedures & records		
10	<input checked="" type="radio"/> In <input type="radio"/> Out			Consumer Advisory			
	Adequate handwashing sinks properly supplied and accessible			25	<input checked="" type="radio"/> In <input type="radio"/> Out <input type="radio"/> N/A		
Approved Source					Consumer advisory provided for raw/undercooked food		
11	<input checked="" type="radio"/> In <input type="radio"/> Out			Highly Susceptible Populations			
	Food obtained from approved source			26	<input checked="" type="radio"/> In <input type="radio"/> Out <input type="radio"/> N/A		
12	<input checked="" type="radio"/> In <input type="radio"/> Out <input type="radio"/> N/A <input type="radio"/> N/O				Pasteurized foods used; prohibited foods not offered		
	Food received at proper temperature			Food/Color Additives and Toxic Substances			
13	<input checked="" type="radio"/> In <input type="radio"/> Out			27	<input checked="" type="radio"/> In <input type="radio"/> Out <input type="radio"/> N/A		
	Food in good condition, safe, and unadulterated				Food additives: approved and properly used		
14	<input checked="" type="radio"/> In <input type="radio"/> Out <input type="radio"/> N/A <input type="radio"/> N/O			28	<input checked="" type="radio"/> In <input type="radio"/> Out <input type="radio"/> N/A		
	Required records available: shellstock tags, parasite destruction				Toxic substances properly identified, stored, and used		
GOOD RETAIL PRACTICES				Conformance with Approved Procedures			
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: McAlister's Deli Establishment #: 959

Water Supply: Public Private Waste Water System: Public Private

Sanitizer Type: Quat/Bleach PPM: 300/100 Heat: RUA

TEMPERATURE OBSERVATIONS					
Item/Location	Temp		Item/Location	Temp	
Walkin	36°F		Steam Table	148°F	
S-1	39°F				
S-2	40°F				
Lettuce Unit	41°F				
Salad Unit	35°F				
Waitress 2-Down	38°F				

OBSERVATIONS AND CORRECTIVE ACTIONS

Item Number	Violations cited in this report must be corrected within the time frames below.	Correct By
35	Provide proper thawing process for chicken breast in kitchen. Upon inspection several bags in 3-comp sink sitting in water. Your process for thawing is to stack bags 1-2 days before use in walkin cooler! Only thaw under refrigeration, under cool running water, or as part of a cooking process.	COS
55	Paint/Seal wall behind tea urns (under counter) + seal table/wall seam to prevent spillage from getting behind counter.	PRR
	*Note • Much better inspection overall! You must continue to monitor bacon labeling process. If bacon is found w/o labels on future inspections/field visits your permit will be suspended immediately!	

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

1823582 x 8/21

HACCP Topic: 16, 19, 20, 21, 22

Person in Charge (Signature) [Signature] Date 11/18/21

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