

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	2	Date	5/25/21
Establishment		License/Permit #		No. of Repeat Risk Factor/Intervention Violations		Time In	11:30
Street Address		City/State		Permit Holder	Erin O'Donnell	Time Out	12:50
ZIP Code		62901		Purpose of Inspection	Routine	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	Compliance Status		COS	R
Supervision							
1	<input checked="" type="radio"/> In, <input type="radio"/> Out						
Person in charge present, demonstrates knowledge, and performs duties							
2	<input checked="" type="radio"/> In, <input type="radio"/> Out, <input type="radio"/> N/A						
Certified Food Protection Manager (CFPM)							
Employee Health							
3	<input checked="" type="radio"/> In, <input type="radio"/> Out						
Management, food employee and conditional employee; knowledge, responsibilities and reporting							
4	<input checked="" type="radio"/> In, <input type="radio"/> Out						
Proper use of restriction and exclusion							
5	<input checked="" type="radio"/> In, <input type="radio"/> Out						
Procedures for responding to vomiting and diarrheal events							
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							
7	<input checked="" type="radio"/> In, <input 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 type="radio"/> Out, <input type="radio"/> N/O						
Hands clean and properly washed							
9	<input 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							
10	<input checked="" type="radio"/> In, <input type="radio"/> Out						
Adequate handwashing sinks properly supplied and accessible							
Approved Source							
11	<input checked="" type="radio"/> In, <input type="radio"/> Out						
Food obtained from approved source							
12	<input type="radio"/> In, <input type="radio"/> Out, <input type="radio"/> N/A, <input checked="" type="radio"/> N/O						
Food received at proper temperature							
13	<input checked="" type="radio"/> In, <input type="radio"/> Out						
Food in good condition, safe, and unadulterated							
14	<input type="radio"/> In, <input type="radio"/> Out, <input checked="" type="radio"/> N/A, <input type="radio"/> N/O						
Required records available: shellstock tags, parasite destruction							

Compliance Status		COS	R
Protection from Contamination			
15	<input checked="" type="radio"/> In, <input type="radio"/> Out, <input type="radio"/> N/A, <input type="radio"/> N/O		
Food separated and protected			
16	<input checked="" type="radio"/> In, <input type="radio"/> Out, <input type="radio"/> N/A		
Food-contact surfaces; cleaned and sanitized			
17	<input checked="" type="radio"/> In, <input type="radio"/> Out		
Proper disposition of returned, previously served, reconditioned and unsafe food			
Time/Temperature Control for Safety			
18	<input type="radio"/> In, <input type="radio"/> Out, <input type="radio"/> N/A, <input checked="" type="radio"/> N/O		
Proper cooking time and temperatures			
19	<input type="radio"/> In, <input type="radio"/> Out, <input type="radio"/> N/A, <input checked="" type="radio"/> N/O		
Proper reheating procedures for hot holding			
20	<input type="radio"/> In, <input type="radio"/> Out, <input type="radio"/> N/A, <input type="radio"/> N/O		
Proper cooling time and temperature			
21	<input type="radio"/> In, <input type="radio"/> Out, <input type="radio"/> N/A, <input type="radio"/> N/O		
Proper hot holding temperatures			
22	<input type="radio"/> In, <input type="radio"/> Out, <input type="radio"/> N/A, <input type="radio"/> N/O		
Proper cold holding temperatures			
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			
24	<input type="radio"/> In, <input type="radio"/> Out, <input checked="" type="radio"/> N/A, <input type="radio"/> N/O		
Time as a Public Health Control; procedures & records			
Consumer Advisory			
25	<input type="radio"/> In, <input type="radio"/> Out, <input checked="" type="radio"/> N/A		
Consumer advisory provided for raw/undercooked food			
Highly Susceptible Populations			
26	<input type="radio"/> In, <input type="radio"/> Out, <input checked="" type="radio"/> N/A		
Pasteurized foods used; prohibited foods not offered			
Food/Color Additives and Toxic Substances			
27	<input type="radio"/> In, <input type="radio"/> Out, <input checked="" type="radio"/> N/A		
Food additives: approved and properly used			
28	<input checked="" type="radio"/> In, <input type="radio"/> Out, <input type="radio"/> N/A		
Toxic substances properly identified, stored, and used			
Conformance with Approved Procedures			
29	<input type="radio"/> In, <input type="radio"/> Out, <input checked="" 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 type="radio"/> In, <input type="radio"/> Out, <input type="radio"/> N/A, <input type="radio"/> N/O						
Pasteurized eggs used where required							
31	<input type="radio"/> In, <input type="radio"/> Out, <input type="radio"/> N/A, <input type="radio"/> N/O						
Water and ice from approved source							
32	<input type="radio"/> In, <input type="radio"/> Out, <input type="radio"/> N/A, <input type="radio"/> N/O						
Variance obtained for specialized processing methods							
Food Temperature Control							
33	<input type="radio"/> In, <input type="radio"/> Out, <input type="radio"/> N/A, <input type="radio"/> N/O						
Proper cooling methods used; adequate equipment for temperature control							
34	<input type="radio"/> In, <input type="radio"/> Out, <input type="radio"/> N/A, <input type="radio"/> N/O						
Plant food properly cooked for hot holding							
35	<input type="radio"/> In, <input type="radio"/> Out, <input type="radio"/> N/A, <input type="radio"/> N/O						
Approved thawing methods used							
36	<input type="radio"/> In, <input type="radio"/> Out, <input type="radio"/> N/A, <input type="radio"/> N/O						
Thermometers provided & accurate							
Food Identification							
37	<input type="radio"/> In, <input type="radio"/> Out, <input type="radio"/> N/A, <input type="radio"/> N/O						
Food properly labeled; original container							
Prevention of Food Contamination							
38	<input type="radio"/> In, <input type="radio"/> Out, <input type="radio"/> N/A, <input type="radio"/> N/O						
Insects, rodents, and animals not present							
39	<input type="radio"/> In, <input type="radio"/> Out, <input type="radio"/> N/A, <input type="radio"/> N/O						
Contamination prevented during food preparation, storage and display							
40	<input type="radio"/> In, <input type="radio"/> Out, <input type="radio"/> N/A, <input type="radio"/> N/O						
Personal cleanliness							
41	<input type="radio"/> In, <input type="radio"/> Out, <input type="radio"/> N/A, <input type="radio"/> N/O						
Wiping cloths: properly used and stored							
42	<input type="radio"/> In, <input type="radio"/> Out, <input type="radio"/> N/A, <input type="radio"/> N/O						
Washing fruits and vegetables							
Proper Use of Utensils							
43	<input type="radio"/> In, <input type="radio"/> Out, <input type="radio"/> N/A, <input type="radio"/> N/O						
In-use utensils: properly stored							
44	<input type="radio"/> In, <input type="radio"/> Out, <input type="radio"/> N/A, <input type="radio"/> N/O						
Utensils, equipment & linens: properly stored, dried, & handled							
45	<input type="radio"/> In, <input type="radio"/> Out, <input type="radio"/> N/A, <input type="radio"/> N/O						
Single-use/single-service articles: properly stored and used							
46	<input type="radio"/> In, <input type="radio"/> Out, <input type="radio"/> N/A, <input type="radio"/> N/O						
Gloves used properly							
Utensils, Equipment and Vending							
47	<input type="radio"/> In, <input type="radio"/> Out, <input type="radio"/> N/A, <input type="radio"/> N/O						
Food and non-food contact surfaces cleanable, properly designed, constructed, and used							
48	<input type="radio"/> In, <input type="radio"/> Out, <input type="radio"/> N/A, <input type="radio"/> N/O						
Warewashing facilities: installed, maintained, & used; test strips							
49	<input checked="" type="radio"/> In, <input type="radio"/> Out, <input type="radio"/> N/A, <input type="radio"/> N/O						
Non-food contact surfaces clean							
Physical Facilities							
50	<input type="radio"/> In, <input type="radio"/> Out, <input type="radio"/> N/A, <input type="radio"/> N/O						
Hot and cold water available; adequate pressure							
51	<input type="radio"/> In, <input type="radio"/> Out, <input type="radio"/> N/A, <input type="radio"/> N/O						
Plumbing installed; proper backflow devices							
52	<input type="radio"/> In, <input type="radio"/> Out, <input type="radio"/> N/A, <input type="radio"/> N/O						
Sewage and waste water properly disposed							
53	<input type="radio"/> In, <input type="radio"/> Out, <input type="radio"/> N/A, <input type="radio"/> N/O						
Toilet facilities: properly constructed, supplied, & cleaned							
54	<input checked="" type="radio"/> In, <input type="radio"/> Out, <input type="radio"/> N/A, <input type="radio"/> N/O						
Garbage & refuse properly disposed; facilities maintained							
55	<input checked="" type="radio"/> In, <input type="radio"/> Out, <input type="radio"/> N/A, <input type="radio"/> N/O						
Physical facilities installed, maintained, and clean							
56	<input checked="" type="radio"/> In, <input type="radio"/> Out, <input type="radio"/> N/A, <input type="radio"/> N/O						
Adequate ventilation and lighting; designated areas used							
Employee Training							
57	<input type="radio"/> In, <input type="radio"/> Out, <input type="radio"/> N/A, <input type="radio"/> N/O						
All food employees have food handler training							
58	<input type="radio"/> In, <input type="radio"/> Out, <input type="radio"/> N/A, <input type="radio"/> N/O						
Allergen training as required							

Food Establishment Inspection Report

Establishment: Papa John's Establishment #: 919
 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
Walkin Pizza Make	-	Chicken	43°F		
Pizza Cheese	45°F	Bottom	36°F		
Shredded Cheese	44°F	Walkin	36°F		
Diced Tomatoes	51°F				
Cheese Sticks	51°F				
Pepperoni	46°F				
Sausage x2	45°F				
Ham	45°F				
Bacon	45°F				

OBSERVATIONS AND CORRECTIVE ACTIONS		
Item Number	Violations cited in this report must be corrected within the time frames below.	Correct By
9	Instruct employees to use gloves or utensils for any product in upper portion of make unit (peppers) that can be provided to customers w/d any additional cooking steps. Upon inspection employees using bare hands to get peppers from container.	Prior to Reopening
22	Provide proper cold hold temp (41°F or less) for all TCS food product in upper portion of pizza make unit. Upon inspection all TCS products in top @ 44-51°F. You have to monitor this unit!	↓
49	Clean shelving in walkin. Mold/mildew present.	
49	Clean interior bottom + shelving in make unit.	
55	Clean venthood in kitchen. Dirt/buildup noted.	
*Notes: o See page 3		

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

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HACCP Topic: 9, 22

Gerin O'Donnell 5/25/21
 Person in Charge (Signature) Date

Inspector (Signature) [Signature] Follow-up: Yes No (Check one) Follow-up Date: Prior to Reopening

Food Establishment Inspection Report

Establishment: Papa Johns

Establishment #: 919

OBSERVATIONS AND CORRECTIVE ACTIONS

Item Number

Violations cited in this report must be corrected within the time frames below.

*Notes:

Due to the continued issues w/ temperature problems w/ the pizza prep unit the Food Service permit for Papa Johns has been suspended until further notice. You are to cease operation immediately.

Failure to cease operation of this facility will subject you to enforcement provisions outlined in the Jackson County Food Service Ordinance. Failure to comply with these provisions will result in fines of up to \$500 per day.

To reopen operation you must service this unit & have it repaired & then a recheck will be performed to verify its operation. A refrigeration log & process for checking temps must be created & a plan to implement it must be proposed prior to your permit being reinstated.

Erin O'Donnell

Person in Charge (Signature)

5/25/21

Date

[Signature]

Inspector (Signature)

Follow-up: Yes No (Check one)

Follow-up Date: Prior to Opening