

State of Ohio Food Inspection Report

Authority: Chapters 3717 and 3715 Ohio Revised Code

Name of facility MCDONALD'S #5100	Check one <input checked="" type="checkbox"/> FSO <input type="checkbox"/> RFE	License Number PR0038634	Date 12/20/2023
Address 619 HARRISBURG PIKE	City/State/Zip Code COLUMBUS, OH 43223		
License holder THE MENDOZA COMPANY LLC	OW0010181	Inspection Time 90	Travel Time 0
Type of Inspection (check all that apply) <input type="checkbox"/> Standard <input type="checkbox"/> Critical Control Point (FSO) <input type="checkbox"/> Process Review (RFE) <input type="checkbox"/> Variance Review <input type="checkbox"/> Follow up <input type="checkbox"/> Foodborne <input type="checkbox"/> 30 Day <input checked="" type="checkbox"/> Complaint <input type="checkbox"/> Pre-licensing <input type="checkbox"/> Consultation		Follow up date (if required) On or after: 01/03/2024	Water sample date/result (if required)

FOODBORNE ILLNESS RISK FACTORS AND PUBLIC HEALTH INTERVENTIONS

Mark 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

Compliance Status		Compliance Status	
Supervision		Time/Temperature Controlled for Safety Food (TCS food)	
1	<input type="checkbox"/> IN <input checked="" type="checkbox"/> OUT <input type="checkbox"/> N/A	23	Person in charge present, demonstrates knowledge, and performs duties
2	<input type="checkbox"/> IN <input type="checkbox"/> OUT <input type="checkbox"/> N/A	24	Proper date marking and disposition
Employee Health		Consumer Advisory	
3	<input type="checkbox"/> IN <input type="checkbox"/> OUT <input type="checkbox"/> N/A	25	Time as a public health control: procedures & records
4	<input type="checkbox"/> IN <input type="checkbox"/> OUT <input type="checkbox"/> N/A	Highly Susceptible Populations	
5	<input type="checkbox"/> IN <input type="checkbox"/> OUT <input type="checkbox"/> N/A	26	Management, food employees and conditional employees; knowledge, responsibilities and reporting
Good Hygienic Practices		Chemical	
6	<input type="checkbox"/> IN <input type="checkbox"/> OUT <input type="checkbox"/> N/O	27	Consumer advisory provided for raw or undercooked foods
7	<input type="checkbox"/> IN <input type="checkbox"/> OUT <input type="checkbox"/> N/O	Conformance with Approved Procedures	
Preventing Contamination by Hands		29	Pasteurized foods used; prohibited foods not offered
8	<input type="checkbox"/> IN <input type="checkbox"/> OUT <input type="checkbox"/> N/O	30	Food additives: approved and properly used
9	<input type="checkbox"/> IN <input type="checkbox"/> OUT <input type="checkbox"/> N/A <input type="checkbox"/> N/O	31	Toxic substances properly identified, stored, used
10	<input type="checkbox"/> IN <input type="checkbox"/> OUT <input type="checkbox"/> N/A	Risk factors are food preparation practices and employee behaviors that are identified as the most significant contributing factors to foodborne illness.	
Approved Source		Public health interventions are control measures to prevent foodborne illness or injury.	
11	<input type="checkbox"/> IN <input type="checkbox"/> OUT	32	Compliance with Reduced Oxygen Packaging, other specialized processes, and HACCP plan
12	<input type="checkbox"/> IN <input type="checkbox"/> OUT <input type="checkbox"/> N/A <input type="checkbox"/> N/O	33	Special Requirements: Fresh Juice Production
13	<input type="checkbox"/> IN <input type="checkbox"/> OUT	34	Special Requirements: Heat Treatment Dispensing Freezers
14	<input type="checkbox"/> IN <input type="checkbox"/> OUT <input type="checkbox"/> N/A <input type="checkbox"/> N/O	35	Special Requirements: Custom Processing
Protection from Contamination		36	Special Requirements: Bulk Water Machine Criteria
15	<input type="checkbox"/> IN <input type="checkbox"/> OUT <input type="checkbox"/> N/A <input type="checkbox"/> N/O	37	Special Requirements: Acidified White Rice Preparation Criteria
16	<input type="checkbox"/> IN <input checked="" type="checkbox"/> OUT <input type="checkbox"/> N/A <input type="checkbox"/> N/O	Critical Control Point Inspection	
17	<input type="checkbox"/> IN <input type="checkbox"/> OUT	Process Review	
Time/Temperature Controlled for Safety Food (TCS food)		Variance	
18	<input type="checkbox"/> IN <input type="checkbox"/> OUT <input type="checkbox"/> N/A <input type="checkbox"/> N/O	<p>Risk factors are food preparation practices and employee behaviors that are identified as the most significant contributing factors to foodborne illness.</p> <p>Public health interventions are control measures to prevent foodborne illness or injury.</p>	
19	<input type="checkbox"/> IN <input type="checkbox"/> OUT <input type="checkbox"/> N/A <input type="checkbox"/> N/O		
20	<input type="checkbox"/> IN <input type="checkbox"/> OUT <input type="checkbox"/> N/A <input type="checkbox"/> N/O		
21	<input type="checkbox"/> IN <input type="checkbox"/> OUT <input type="checkbox"/> N/A <input type="checkbox"/> N/O		
22	<input type="checkbox"/> IN <input type="checkbox"/> OUT <input type="checkbox"/> N/A		

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GOOD RETAIL PRACTICES

Good Retail Practices are preventative measures to control the introduction of pathogens, chemicals, and physical objects into foods.
 Mark 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

Safe Food and Water		Utensils, Equipment and Vending		
38	<input type="checkbox"/> IN <input type="checkbox"/> OUT <input type="checkbox"/> N/A <input type="checkbox"/> N/O	Pasteurized eggs used where required	54 <input type="checkbox"/> IN <input type="checkbox"/> OUT Food and nonfood-contact surfaces cleanable, properly designed, constructed and used	
39	<input type="checkbox"/> IN <input type="checkbox"/> OUT <input type="checkbox"/> N/A	Water and ice from approved source	55 <input type="checkbox"/> IN <input type="checkbox"/> OUT <input type="checkbox"/> N/A Warewashing facilities: installed, maintained, used; test strips	
Food Temperature Control		Physical Facilities		
40	<input type="checkbox"/> IN <input type="checkbox"/> OUT <input type="checkbox"/> N/A <input type="checkbox"/> N/O	Proper cooling methods used; adequate equipment for temperature control	56 <input type="checkbox"/> IN <input type="checkbox"/> OUT Nonfood-contact surfaces clean	
41	<input type="checkbox"/> IN <input type="checkbox"/> OUT <input type="checkbox"/> N/A <input type="checkbox"/> N/O	Plant food properly cooked for hot holding	57 <input type="checkbox"/> IN <input type="checkbox"/> OUT <input type="checkbox"/> N/A Hot and cold water available; adequate pressure	
42	<input type="checkbox"/> IN <input type="checkbox"/> OUT <input type="checkbox"/> N/A <input type="checkbox"/> N/O	Approved thawing methods used	58 <input type="checkbox"/> IN <input type="checkbox"/> OUT <input type="checkbox"/> N/A <input type="checkbox"/> N/O Plumbing installed; proper backflow devices	
43	<input type="checkbox"/> IN <input type="checkbox"/> OUT <input type="checkbox"/> N/A	Thermometers provided and accurate	59 <input type="checkbox"/> IN <input type="checkbox"/> OUT <input type="checkbox"/> N/A Sewage and waste water properly disposed	
Food Identification		60 <input type="checkbox"/> IN <input type="checkbox"/> OUT <input type="checkbox"/> N/A Toilet facilities: properly constructed, supplied, cleaned	61 <input type="checkbox"/> IN <input type="checkbox"/> OUT <input type="checkbox"/> N/A Garbage/refuse properly disposed; facilities maintained	
Prevention of Food Contamination		62 <input type="checkbox"/> IN <input type="checkbox"/> OUT <input type="checkbox"/> N/A <input type="checkbox"/> N/O Physical facilities installed, maintained, and clean; dogs in outdoor dining areas	63 <input type="checkbox"/> IN <input type="checkbox"/> OUT Adequate ventilation and lighting; designated areas used	
45	<input type="checkbox"/> IN <input type="checkbox"/> OUT	Insects, rodents, and animals not present/outer openings protected	64 <input type="checkbox"/> IN <input type="checkbox"/> OUT <input type="checkbox"/> N/A Existing Equipment and Facilities	
46	<input type="checkbox"/> IN <input checked="" type="checkbox"/> OUT	Contamination prevented during food preparation, storage & display	Administrative	
47	<input type="checkbox"/> IN <input type="checkbox"/> OUT <input type="checkbox"/> N/A	Personal cleanliness	65 <input type="checkbox"/> IN <input type="checkbox"/> OUT <input type="checkbox"/> N/A 901:3-4 OAC	66 <input type="checkbox"/> IN <input type="checkbox"/> OUT <input type="checkbox"/> N/A 3701-21 OAC
48	<input type="checkbox"/> IN <input type="checkbox"/> OUT <input type="checkbox"/> N/A <input type="checkbox"/> N/O	Wiping cloths: properly used and stored		
49	<input type="checkbox"/> IN <input type="checkbox"/> OUT <input type="checkbox"/> N/A <input type="checkbox"/> N/O	Washing fruits and vegetables		
Proper Use of Utensils				
50	<input type="checkbox"/> IN <input type="checkbox"/> OUT <input type="checkbox"/> N/A <input type="checkbox"/> N/O	In-use utensils: properly stored		
51	<input type="checkbox"/> IN <input type="checkbox"/> OUT <input type="checkbox"/> N/A	Utensils, equipment and linens: properly stored, dried, handled		
52	<input type="checkbox"/> IN <input type="checkbox"/> OUT <input type="checkbox"/> N/A	Single-use/single-service articles: properly stored, used		
53	<input type="checkbox"/> IN <input type="checkbox"/> OUT <input type="checkbox"/> N/A <input type="checkbox"/> N/O	Slash-resistant, cloth, and latex glove use		

Observations and Corrective Actions

Mark "X" in appropriate box for COS and R: **COS**=corrected on-site during inspection **R**=repeat violation

Item No.	Code Section	Priority Level	Comment	COS	R
16	3717-1-04.5(A)(1)	C	Food-contact surfaces were dirty. Comply By: 1/3/2024	<input type="checkbox"/>	<input type="checkbox"/>
			Observed construction dust on surfaces of food preparation counters, equipment and flooring.		
46	3717-1-03.2(T)	NC	Food is not protected from environmental sources of contamination during preparation.	<input type="checkbox"/>	<input type="checkbox"/>
			Observed construction debris (wooden trim boards, loose screws, unassembled computer equipment, wiring, tubing and tools) on top of food service equipment and prep areas.		
1	3717-1-02.4(C)(2)	C	There were persons unnecessary to the operation present in restricted areas. Comply By: 1/3/2024	<input type="checkbox"/>	<input type="checkbox"/>
			Observed heavy construction being performed on the restaurant seating area and front service counter and beverage service station. Construction workers were moving freely through the food prep areas and the customer seating area.		

Person in Charge 	12/20/2023 4:43:57PM	Date: 12/20/2023
Sanitarian N. SARGEANT	Licensors: Columbus Public Health publichealth.columbus.gov	

PRIORITY LEVEL: C = CRITICAL NC = NON-CRITICAL

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Observations and Corrective Actions (continued)				
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Item No.	Code Section	Priority Level	Comment	COS	R
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Persons in charge (PIC's) are: Sharon Plew- Director of Operations, Scott Strohl- Operations Supervisor, Taylor- General Manager

REHS Neal Sargeant and REHSIT Adam Bornhorst arrived at 1:10pm and introduced ourselves. PIC's brought us back to the kitchen office area to discuss the incident and nature of complaint. Upon our entrance we observed heavy construction being performed on the restaurant seating area, front service counter, and beverage service station. We observed construction workers moving freely through the food prep areas and the customer seating area. Construction equipment, debris, trash, and dust were present. Construction employee of Mark-L Inc Construction stated that tile work in the front service area had been conducted a couple days prior to today. The protective barrier was removed at the time the tile work began. The barrier was never replaced after the tile work was completed. There was an accumulation of construction debris being placed on equipment after the barrier was removed. Floor work was still being conducted at the time of REHS's arrival. Equipment such as the milk shake machines, coffee maker and frozen beverage machines have been pulled away from their ordinary locations and some had been disconnected and inoperable. Beverage service equipment such as soda dispenser, frappucino machine, frozen beverage dispenser, coffee machine had dust, debris, screws, unassembled computer equipment, wooden trim pieces on the top surfaces. REHS observed personal cell phones on top of the grill. There was no protective barrier between the construction area and the food service area. Construction debris and equipment were heavily present throughout the facility.


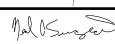
REHSII Sarah Badenhop arrived with signed Emergency Notice of Violation and Order to Close. Green sign removed and replaced w/ red sign. Reinspection is ordered prior to facility reopening for public service. PIC will advise REHS at time after equipment has been reassembled, cleaned and thoroughly sanitized.

Influenza (flu) is a respiratory illness that can be serious, sometimes leading to hospitalization and even death. Getting a flu vaccine is the single best way to protect yourself and your loved ones from flu, along with some other important steps.

Prevent getting or spreading the flu.

- Wash your hands
- Cover your cough
- Stay home if you're sick

Please visit <https://www.columbus.gov/publichealth/programs/Seasonal-Flu-Prevention/Seasonal-Flu-Home/> for more information.

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If you would like this report translated, you can receive free translation or interpretation services from Columbus Public Health. Please contact us at Environmental_Health@columbus.gov or at 614-645-7005 if you would like to request translation or interpretation services related to this inspection.

إذا كنت ترغب في ترجمة هذا التقرير، فيمكنك الحصول على خدمات الترجمة التحريرية أو الترجمة الفورية المجانية من **Public Health Columbus**. يرجى الاتصال بنا على Environmental_Health@columbus.gov أو على الرقم 614-645-7005 إذا كنت ترغب في طلب خدمات الترجمة التحريرية أو الترجمة الفورية المتعلقة بهذا الفحص.

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Si vous désirez avoir ce compte-rendu traduit, vous pouvez bénéficier de services de traduction ou d'interprétation gratuits de Columbus Public Health. Veuillez nous contacter à Environmental_Health@columbus.gov ou au 614-645-7005 si vous désirez faire appel à des services de traduction ou d'interprétation liés à cette inspection.

To on yidi derewol ngol ngol waylite ko ngol fassitire der demngal feere **Columbus Public Health** efti waylango ngol malla fassitirgo ngol *bilaa njobdi*. Useni windine min haa Environmental_Health@columbus.gov maa bo ewne lamba 614-645-7005 to on yidi waylugol maa fassaruuwe der demgal feere haa ko laarani tuumtaade nde.

이 보고서의 번역을 원하시면 **Columbus Public Health** 에서 무료 통·번역 서비스를 제공해 드립니다. 이 검사와 관련한 통·번역 서비스 요청은 이메일 (Environmental_Health@columbus.gov) 또는 전화(614-645-7005)로 연락해 주십시오.


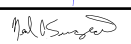
Haddii aad jeclaan lahayd in warbixintan lagu tarjumo, waxaad ka heli kartaa adeegyo tarjumaad oo bilaash ah **Columbus Public Health**. Fadlan nagala soo xiriir barta Environmental_Health@columbus.gov ama lambarka 614-645-7005 haddii aad doonayso inaad codsato adeegyada turjumaada ee la xiriira kormeerkan.

Si desea que le traduzcan este informe, puede recibir gratis servicios de traducción o interpretación de **Columbus Public Health**. Por favor, póngase en contacto con nosotros en Environmental_Health@columbus.gov o en el 614-645-7005 si desea solicitar servicios de traducción o interpretación en relación con esta inspección.

Si ou ta renmen resewva tradiksyon rapò sa a, ou ka resewva sèvis tradiksyon oswa entèpretasyon gratis nan **Columbus Public Health**. Tanpri kontakte nou nan Environmental_Health@columbus.gov oswa nan 614-645-7005 si ou ta renmen mande sèvis tradiksyon oswa entèpretasyon ki lye ak enspeksyon sa a.

که چیرته تاسو غواری چي دغه راپور وژبارل شي، نو تاسو کولای شي چي د **Columbus Public Health** څخه د ژباري يا ترجماني وړيا خدمتونه ترلاسه کړئ. که تاسو غواری د دي پلټني اړوند د ژباري يا ترجماني د خدمتونو غوښتنه وکړئ، مهرباني وکړئ له مور سره د Environmental_Health@columbus.gov یا 614-645-7005 شمېري له لاري اړیکه ونیسئ.

Ikiwa utapenda ripoti hii itafsiriwe, unaweza kupokea huduma wa ufasiri au ukalimani bila malipo kutoka **Columbus Public Health**. Tafadhali wasiliana nasi kupitia Environmental_Health@columbus.gov au 614-645-7005 ikiwa ungependa kuomba huduma za ufasiri au ukalimani zinazohusiana na ukaguzi huu.

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