



MISSOURI DEPARTMENT OF HEALTH AND SENIOR SERVICES
BUREAU OF ENVIRONMENTAL HEALTH SERVICES
FOOD ESTABLISHMENT INSPECTION REPORT

TIME IN April 13, 2015	11:24 am	TIME OUT 2:05 pm
DATE		PAGE 1 of 5

BASED ON AN INSPECTION THIS DAY, THE ITEMS NOTED BELOW IDENTIFY NONCOMPLIANCE IN OPERATIONS OR FACILITIES WHICH MUST BE CORRECTED BY THE NEXT ROUTINE INSPECTION, OR SUCH SHORTER PERIOD OF TIME AS MAY BE SPECIFIED IN WRITING BY THE REGULATORY AUTHORITY. FAILURE TO COMPLY WITH ANY TIME LIMITS FOR CORRECTIONS SPECIFIED IN THIS NOTICE MAY RESULT IN CESSATION OF YOUR FOOD OPERATIONS.

ESTABLISHMENT NAME: C-Barn #3	OWNER: Ray Johnson	PERSON IN CHARGE: Missy Burnia	
ADDRESS: 108 South Desloge Drive	ESTABLISHMENT NUMBER: 4389	COUNTY: 187	
CITY/ZIP: Desloge 63601	PHONE: (573)518-0605	FAX: none	P.H. PRIORITY : <input type="checkbox"/> H <input checked="" type="checkbox"/> M <input type="checkbox"/> L
ESTABLISHMENT TYPE <input type="checkbox"/> BAKERY <input type="checkbox"/> C. STORE <input type="checkbox"/> CATERER <input type="checkbox"/> DELI <input type="checkbox"/> GROCERY STORE <input type="checkbox"/> INSTITUTION <input type="checkbox"/> MOBILE VENDORS <input type="checkbox"/> RESTAURANT <input type="checkbox"/> SCHOOL <input type="checkbox"/> SENIOR CENTER <input type="checkbox"/> SUMMER F.P. <input type="checkbox"/> TAVERN <input type="checkbox"/> TEMP.FOOD			
PURPOSE <input type="checkbox"/> Pre-opening <input checked="" type="checkbox"/> Routine <input type="checkbox"/> Follow-up <input type="checkbox"/> Complaint <input type="checkbox"/> Other _____			
FROZEN DESSERT <input type="checkbox"/> Approved <input type="checkbox"/> Disapproved <input type="checkbox"/> Not Applicable License No. _____	SEWAGE DISPOSAL <input type="checkbox"/> PUBLIC <input type="checkbox"/> PRIVATE	WATER SUPPLY <input type="checkbox"/> COMMUNITY <input type="checkbox"/> NON-COMMUNITY Date Sampled _____ Results _____	

RISK FACTORS AND INTERVENTIONS

Risk factors are food preparation practices and employee behaviors most commonly reported to the Centers for Disease Control and Prevention as contributing factors in foodborne illness outbreaks. **Public health interventions** are control measures to prevent foodborne illness or injury.

Compliance	Demonstration of Knowledge	COS	R	Compliance	Potentially Hazardous Foods	COS	R
<input checked="" type="checkbox"/> OUT	Person in charge present, demonstrates knowledge, and performs duties			<input checked="" type="checkbox"/> OUT <input type="checkbox"/> N/O <input type="checkbox"/> N/A	Proper cooking, time and temperature		
	Employee Health			<input checked="" type="checkbox"/> OUT <input type="checkbox"/> N/O <input type="checkbox"/> N/A	Proper reheating procedures for hot holding		
<input checked="" type="checkbox"/> OUT	Management awareness; policy present			<input checked="" type="checkbox"/> OUT <input type="checkbox"/> N/O <input type="checkbox"/> N/A	Proper cooling time and temperatures		
<input checked="" type="checkbox"/> OUT	Proper use of reporting, restriction and exclusion			<input checked="" type="checkbox"/> OUT <input type="checkbox"/> N/O <input type="checkbox"/> N/A	Proper hot holding temperatures		
	Good Hygienic Practices			<input checked="" type="checkbox"/> OUT <input type="checkbox"/> N/C <input type="checkbox"/> N/A	Proper cold holding temperatures		
<input checked="" type="checkbox"/> OUT <input type="checkbox"/> N/O	Proper eating, tasting, drinking or tobacco use			<input type="checkbox"/> IN <input checked="" type="checkbox"/> OUT <input type="checkbox"/> N/C <input type="checkbox"/> N/A	Proper date marking and disposition		
<input checked="" type="checkbox"/> OUT <input type="checkbox"/> N/O	No discharge from eyes, nose and mouth			<input type="checkbox"/> IN <input checked="" type="checkbox"/> OUT <input type="checkbox"/> N/O <input checked="" type="checkbox"/> N/A	Time as a public health control (procedures / records)		
	Preventing Contamination by Hands				Consumer Advisory		
<input checked="" type="checkbox"/> OUT <input type="checkbox"/> N/O	Hands clean and properly washed			<input type="checkbox"/> IN <input checked="" type="checkbox"/> OUT <input type="checkbox"/> N/A	Consumer advisory provided for raw or undercooked food		
<input checked="" type="checkbox"/> OUT <input type="checkbox"/> N/O	No bare hand contact with ready-to-eat foods or approved alternate method properly followed				Highly Susceptible Populations		
<input checked="" type="checkbox"/> OUT	Adequate handwashing facilities supplied & accessible			<input type="checkbox"/> IN <input checked="" type="checkbox"/> OUT <input type="checkbox"/> N/O <input checked="" type="checkbox"/> N/A	Pasteurized foods used, prohibited foods not offered		
	Approved Source				Chemical		
<input checked="" type="checkbox"/> OUT	Food obtained from approved source			<input type="checkbox"/> IN <input checked="" type="checkbox"/> OUT <input type="checkbox"/> N/A	Food additives: approved and properly used		
<input type="checkbox"/> IN <input checked="" type="checkbox"/> OUT <input type="checkbox"/> N/C <input type="checkbox"/> N/A	Food received at proper temperature			<input type="checkbox"/> IN <input checked="" type="checkbox"/> OUT <input type="checkbox"/> N/A	Toxic substances properly identified, stored and used		
<input checked="" type="checkbox"/> OUT	Food in good condition, safe and unadulterated				Conformance with Approved Procedures		
<input type="checkbox"/> IN <input checked="" type="checkbox"/> OUT <input type="checkbox"/> N/O <input checked="" type="checkbox"/> N/A	Required records available: shellstock tags, parasite destruction			<input type="checkbox"/> IN <input checked="" type="checkbox"/> OUT <input type="checkbox"/> N/A	Compliance with approved Specialized Process and HACCP plan		
	Protection from Contamination				The letter to the left of each item indicates that item's status at the time of the inspection. IN = in compliance N/A = not applicable OUT = not in compliance N/O = not observed COS=Corrected On Site R=Repeat Item		
<input type="checkbox"/> IN <input checked="" type="checkbox"/> OUT <input type="checkbox"/> N/A	Food separated and protected						
<input type="checkbox"/> IN <input checked="" type="checkbox"/> OUT <input type="checkbox"/> N/A	Food-contact surfaces cleaned & sanitized						
<input checked="" type="checkbox"/> OUT <input type="checkbox"/> N/O	Proper disposition of returned, previously served, reconditioned, and unsafe food						

GOOD RETAIL PRACTICES

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

IN	OUT	Safe Food and Water	COS	R	IN	OUT	Proper Use of Utensils	COS	R
<input checked="" type="checkbox"/>		Pasteurized eggs used where required			<input checked="" type="checkbox"/>		In-use utensils: properly stored		
<input checked="" type="checkbox"/>		Water and ice from approved source			<input checked="" type="checkbox"/>		Utensils, equipment and linens: properly stored, dried, handled		
		Food Temperature Control			<input type="checkbox"/>	<input checked="" type="checkbox"/>	Single-use/single-service articles: properly stored, used		
<input checked="" type="checkbox"/>		Adequate equipment for temperature control			<input checked="" type="checkbox"/>		Gloves used properly		
<input checked="" type="checkbox"/>		Approved thawing methods used					Utensils, Equipment and Vending		
<input type="checkbox"/>	<input checked="" type="checkbox"/>	Thermometers provided and accurate			<input type="checkbox"/>	<input checked="" type="checkbox"/>	Food and nonfood-contact surfaces cleanable, properly designed, constructed, and used		
		Food Identification			<input checked="" type="checkbox"/>		Warewashing facilities: installed, maintained, used; test strips used		
<input type="checkbox"/>	<input checked="" type="checkbox"/>	Food properly labeled; original container			<input type="checkbox"/>	<input checked="" type="checkbox"/>	Nonfood-contact surfaces clean		
		Prevention of Food Contamination					Physical Facilities		
<input checked="" type="checkbox"/>		Insects, rodents, and animals not present			<input checked="" type="checkbox"/>		Hot and cold water available; adequate pressure		
<input type="checkbox"/>	<input checked="" type="checkbox"/>	Contamination prevented during food preparation, storage and display			<input checked="" type="checkbox"/>		Plumbing installed; proper backflow devices		
<input checked="" type="checkbox"/>		Personal cleanliness: clean outer clothing, hair restraint, fingernails and jewelry			<input checked="" type="checkbox"/>		Sewage and wastewater properly disposed		
<input checked="" type="checkbox"/>		Wiping cloths: properly used and stored			<input checked="" type="checkbox"/>		Toilet facilities: properly constructed, supplied, cleaned		
<input checked="" type="checkbox"/>		Fruits and vegetables washed before use			<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	Garbage/refuse properly disposed; facilities maintained		
					<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	Physical facilities installed, maintained, and clean		

Person in Charge / Title:
Missy Burnia

Missy Burnia

Date: April 13, 2015

Inspector: *Rose Mier*

Rose Mier

Telephone No.
(573)431-1947

EPHS No.
1390

Follow-up: Yes No
Follow-up Date: April 27, 2015



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ESTABLISHMENT NAME C-Barn #3		ADDRESS 108 South Desloge Drive		CITY/ZIP Desloge 63601	
FOOD PRODUCT/LOCATION		TEMP. in ° F	FOOD PRODUCT/ LOCATION	TEMP. in ° F	
Hot dog, roller cooker		159	Ambient, Boser's Pizza Cabinet	168	
Ambient, creamer dispenser		40	Ambient, Gehl cheese dispenser	135	
Riblet, cooker		172	Ambient, refrigerator/freezer	8/42	
Ambient, chest freezer, store room		8	Ambient, GE freezer	8	
Ambient, walk-in cooler		35	Ambient, shake freezer	9	
Code Reference	PRIORITY ITEMS Priority items contribute directly to the elimination, prevention or reduction to an acceptable level, hazards associated with foodborne illness or injury. These items MUST RECEIVE IMMEDIATE ACTION within 72 hours or as stated.				Correct by (date)
3-501.17A	Food (gravy, repackaged cheese) was not marked with the disposition date in the refrigerator. Ready-to-eat, potentially hazardous food held for more than 24 hours shall be marked with the date of disposition, which is the day of preparation plus an additional 6 days (7 days total). Please label foods with the correct date of disposition.				4/13/15
3-302.11A	Raw hamburger was stored above fully-cooked foods in the refrigerator. Raw meats shall be stored beneath fully-cooked and ready-to-eat foods to prevent cross-contamination. Please store food in the following order: raw poultry and eggs on bottom, then ground meats, then whole muscle meats, then fish and seafood, then fully-cooked and ready to eat foods.				
4-601.11A	The microwave had an accumulation of debris on all inside surfaces. Food contact surfaces shall be clean to sight and touch. Please wash, rinse, and sanitize a minimum of every four hours while in continual use.				
4-601.11A	The donut cabinet and trays had donut debris on them (the cabinet contained no donuts). The trays were lined with foil and taped. Please clean cabinet. According to employer, the trays are card board and covered with foil. Please do not use tape and ensure trays are discarded daily.				
3-501.17A	Creamer in the cream dispenser was not marked with the date of disposition. Please label boxes in the provided space with a 7-day disposition date, as explained above.				
4-202.11A	Food storage containers in the kitchen cabinet were marred. Food contact surfaces shall be smooth and free of imperfections. Please dispose of all marred containers.				
Code Reference	CORE ITEMS Core items relate to general sanitation, operational controls, facilities or structures, equipment design, general maintenance or sanitation standard operating procedures (SSOPs). These items are to be corrected by the next regular inspection or as stated.				Correct by (date)
6-303.11A	There was no lighting in the mop sink room. Lighting shall be sufficient to allow effective cleaning. Please replace bulb or fixture.				4/15/15
6-501.18	The handwashing sink in the mop room was dirty. Handwashing sinks shall be cleaned as often as needed to keep clean. Please clean.				4/15/15
4-101.19	The inside of the refrigerator was in poor condition with breaks and missing pieces. Tape was used to help repair and hold food in position. Food equipment shall be maintained in good repair. Please remove refrigerator from facility.				4/27/15
4-501.11A					
4-601.11C	Accumulation of debris observed inside the refrigerator. Nonfood contact surfaces shall be cleaned as often as needed to keep clean. Please clean refrigerator.				4/15/15
6-501.18	The handwashing sink in the cooking area was dirty. Handwashing sinks shall be cleaned as often as needed to keep clean. Please clean.				4/15/15
4-601.11C	Accumulation of debris observed on the hot water heater beneath the handwashing sink in the kitchen. Nonfood contact surfaces shall be cleaned as often as needed to keep clean. Please clean.				4/15/15
4-601.11C	Accumulation of dust/debris observed on the wires, tubes, and table behind the slush maker. Nonfood contact surfaces shall be cleaned as often as needed to keep clean. Please clean.				4/27/15

EDUCATION PROVIDED OR COMMENTS

Person in Charge /Title: *Missy Burnia* Missy Burnia Date: April 13, 2015

Inspector: <i>Rose Mier</i>	Rose Mier	Telephone No. (573)431-1947	EPHS No. 1390	Follow-up: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
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FOOD PRODUCT/LOCATION		TEMP. in ° F	FOOD PRODUCT/ LOCATION		TEMP. in ° F
Ambient, Holiday chest freezer, drive-up		5			
Code Reference	PRIORITY ITEMS Priority items contribute directly to the elimination, prevention or reduction to an acceptable level, hazards associated with foodborne illness or injury. These items MUST RECEIVE IMMEDIATE ACTION within 72 hours or as stated.				Correct by (date)
4-601.11A	Mold was observed on the inside of the ice maker. Food contact surfaces shall be clean. Please dispose of ice, wash, rinse, sanitizer, and air dry before returning to service.				4/15/15
4-202.11A	The bucket used to transport ice was badly scratched and dirty. Food contact surfaces shall be clean and free of imperfections. Please dispose of bucket and replace with a food-grade bucket. Wash, rinse, sanitize bucket daily.				✓
4-601.11A	Two ice scoops were stored in a container on top of the ice maker. The red plastic scoop was dirty and scratched; the metal scoop was broken. The container had debris on the inside. Food contact surfaces shall be clean, smooth, and free of imperfections. Please dispose of scoops.				✓
7-202.12A	A can of Raid insecticide was stored beneath the 3-vat sink. This insecticide is not approved for use in a food establishment. Please remove from premises.				4/13/15
7-202.12A	A can of Rid A Bug insecticide was stored beneath the handwashing sink in the check-out counter area. This insecticide is not approved fro use in a food establishment. Please remove.				4/13/15
Code Reference	CORE ITEMS Core items relate to general sanitation, operational controls, facilities or structures, equipment design, general maintenance or sanitation standard operating procedures (SSOPs). These items are to be corrected by the next regular inspection or as stated.				Correct by (date)
4-601.11C	Food splatters observed on the lids of containers holding condiments on the shelf below the creamer. Please clean as often as needed to keep clean.				4/27/15
6-501.12A	Accumulation of debris observed on the floor beneath and around equipment and pallets in the room with the 3-vat sink, mop room, hall, office, and areas in front of both ends of the walk-in cooler. Facilities shall be cleaned as often as needed to keep clean. Please clean.				✓
4-501.14C	Debris observed on the drainboard of the 3-vat sink. Sinks shall be cleaned and sanitized after use. Please clean.				✓
4-101.19	The drying rack on the 3-vat sink drainboard was rusting where plastic was worn off. This equipment is no longer cleanable. Equipment exposed to splash or requiring frequent cleaning shall be smooth and made of noncorrosive material. Please dispose of drain rack.				✓
6-202.11	The wall surrounding the 3-vat sink was dirty and had damage, exposing bare wood. Walls exposed to splash or requiring frequent cleaning shall be smooth and non-absorbent. Please clean, repair, and seal walls.				✓
4-903.11A	A box of single-use cups was stored on the floor next to the 3-vat sink. Single-use items shall be stored a minimum of six inches off the floor. Please store off floor.				✓
6-201.11	Floor tiles were broken throughout the back area (warewash room, mop room, hall, and in front of both ends of the walk-in cooler), exposing bare wood. Flooring shall be smooth and non-absorbent. Please replace.				✓

EDUCATION PROVIDED OR COMMENTS

Person in Charge /Title: *Missy Burnia* Missy Burnia Date: April 13, 2015

Inspector: *Rose Mier* Rose Mier Telephone No. (573)-431-1947 EPHS No. 1390 Follow-up: Yes No
Follow-up Date: April 27, 2015



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Code Reference	CORE ITEMS Core items relate to general sanitation, operational controls, facilities or structures, equipment design, general maintenance or sanitation standard operating procedures (SSOPs). These items are to be corrected by the next regular inspection or as stated.				Correct by (date)	Initial
6-201.13A	Coving was missing at the wall-floor juncture in several areas in the back room (warewash room, mop room, office, hall, and walk-in cooler areas). Floor/wall junctures shall be closed with coving. Please install coving.				4/27/15	
6-501.18	Accumulation of debris observed in the mop sink. Mop sinks shall be cleaned as often as needed to keep clean. Please clean all surfaces.					
6-501.16	Wet mop was stored in the empty mop bucket. Mops shall be stored to allow drying. Please install mop hooks in a location where single-use items, equipment, or food cannot be contaminated.					
4-204.112	A thermometer was not found in the GE freezer. Thermometers shall be located in a convenient-to-read location in the warmest part of the unit. Please install thermometer that reads between 0 and 220F in two degree increments.					
6-501.14A	Accumulation of dust on the grates on the back of the fans for the condenser unit in the walk-in cooler. Ventilation systems shall be clean to prevent contamination from dust. Please clean as often as needed to keep clean.					
4-501.11B	Seals were pulled out of the seam or torn on five doors of the walk-in cooler (glass doors). Seals shall be in good repair. Please replace seals into door crevice or replace if torn.					
6-202.15A	Daylight was observed between the front entry doors. Doors shall be tight-fitting and sealed. Please seal door to reduce pest entry points.					

EDUCATION PROVIDED OR COMMENTS

Person in Charge /Title: *Missy Burnia* Missy Burnia Date: April 13, 2015

Inspector: *Rose Mier* Rose Mier Telephone No. (573)431-1947 EPHS No. 1390 Follow-up: Yes No
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Code Reference	CORE ITEMS Core items relate to general sanitation, operational controls, facilities or structures, equipment design, general maintenance or sanitation standard operating procedures (SSOPs). These items are to be corrected by the next regular inspection or as stated.				Correct by (date)
6-304.11	The mechanical vent in the bathroom did not appear to be working. Bathrooms shall be supplied with ventilation. Please repair or replace unit.				4/27/15
6-501.12A	Accumulation of debris observed on the floor of the bathroom. Please clean as often as needed to keep clean.				
4-601.11C	Accumulation of debris observed in the cabinets beneath the soda and coffee dispensers. Please clean as often as needed to keep clean.				
4-101.19	Damage observed on the front and side of the soda dispensing cabinet, exposing bare wood. Surfaces needing frequent cleaning shall be smooth and nonabsorbent. Please repair.				
5-501.114	There was no plug in the drain of the outdoor recycling dumpster. Plugs shall be in drains on outdoor trash receptacles. Please install a plug.				
6-202.15A	Holes observed around conduit/pipe that entered the building on the south side, and where the drive up hose alarm entered the building on the north side. Outside openings shall be sealed to prevent pest entry. Please seal all holes on the exterior of the building.				
EDUCATION PROVIDED OR COMMENTS					
Person in Charge /Title: <i>Missy Burnia</i>		Missy Burnia		Date: April 13, 2015	
Inspector: <i>Rose Mier</i>	Rose Mier	Telephone No. (573)431-1947	EPHS No. 1390	Follow-up: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Follow-up Date: April 27, 2015	