



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

TIME IN	10:58am	TIME OUT	1:05pm
DATE	1-7-16	PAGE	1 of 3

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: Casey's General Store #1300		OWNER: Casey's General Stores, Inc.		PERSON IN CHARGE: Annette Dunlap	
ADDRESS: 226 South Front Street			ESTABLISHMENT NUMBER: 2187		COUNTY: 187
CITY/ZIP: Park Hills, 63601		PHONE: 573-431-2824		FAX: na	
PURPOSE <input type="checkbox"/> Pre-opening <input checked="" type="checkbox"/> Routine <input type="checkbox"/> Follow-up <input type="checkbox"/> Complaint <input type="checkbox"/> Other _____					
ESTABLISHMENT TYPE <input type="checkbox"/> BAKERY RESTAURANT <input checked="" type="checkbox"/> C. STORE SCHOOL <input type="checkbox"/> CATERER SENIOR CENTER <input type="checkbox"/> DELI SUMMER F.P. <input type="checkbox"/> GROCERY STORE TAVERN <input type="checkbox"/> INSTITUTION TEMP.FOOD <input type="checkbox"/> MOBILE VENDORS					
FROZEN DESSERT <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Disapproved <input checked="" type="checkbox"/> Not Applicable License No. _____		SEWAGE DISPOSAL <input checked="" type="checkbox"/> PUBLIC <input type="checkbox"/> PRIVATE		WATER SUPPLY <input checked="" type="checkbox"/> COMMUNITY <input type="checkbox"/> NON-COMMUNITY <input type="checkbox"/> PRIVATE 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 type="checkbox"/> IN <input type="checkbox"/> OUT <input checked="" type="checkbox"/> NO <input type="checkbox"/> N/A	Proper cooking, time and temperature		
Employee Health				<input type="checkbox"/> IN <input type="checkbox"/> OUT <input checked="" type="checkbox"/> NO <input type="checkbox"/> N/A	Proper reheating procedures for hot holding		
<input checked="" type="checkbox"/> OUT	Management awareness; policy present			<input type="checkbox"/> IN <input type="checkbox"/> OUT <input checked="" type="checkbox"/> NO <input type="checkbox"/> N/A	Proper cooling time and temperatures		
<input checked="" type="checkbox"/> OUT	Proper use of reporting, restriction and exclusion			<input type="checkbox"/> IN <input type="checkbox"/> OUT <input checked="" type="checkbox"/> NO <input type="checkbox"/> N/A	Proper hot holding temperatures		
Good Hygienic Practices				<input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT <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 checked="" type="checkbox"/> IN <input type="checkbox"/> OUT <input type="checkbox"/> N/O <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 type="checkbox"/> N/A	Time as a public health control (procedures / records)		<input checked="" type="checkbox"/>
Preventing Contamination by Hands				<input type="checkbox"/> IN <input type="checkbox"/> OUT <input checked="" type="checkbox"/> N/A	Consumer Advisory		
<input checked="" type="checkbox"/> OUT <input type="checkbox"/> N/O	Hands clean and properly washed			<input type="checkbox"/> IN <input type="checkbox"/> OUT <input checked="" 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 type="checkbox"/> OUT <input type="checkbox"/> N/O <input checked="" type="checkbox"/> N/A	Pasteurized foods used, prohibited foods not offered		
Approved Source				<input type="checkbox"/> IN <input type="checkbox"/> OUT <input checked="" type="checkbox"/> N/A	Chemical		
<input checked="" type="checkbox"/> OUT	Food obtained from approved source			<input type="checkbox"/> IN <input type="checkbox"/> OUT <input checked="" type="checkbox"/> N/A	Food additives: approved and properly used		
<input type="checkbox"/> IN <input type="checkbox"/> OUT <input checked="" type="checkbox"/> N/A	Food received at proper temperature			<input type="checkbox"/> IN <input checked="" type="checkbox"/> OUT	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 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 type="checkbox"/> OUT <input checked="" 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 OUT = not in compliance N/A = not applicable 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 checked="" type="checkbox"/>					
<input type="checkbox"/> IN <input checked="" type="checkbox"/> OUT <input type="checkbox"/> N/A	Food-contact surfaces cleaned & sanitized	<input checked="" type="checkbox"/>					
<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	COS	R	IN	OUT	COS	R
Safe Food and Water				Proper Use of Utensils			
<input checked="" type="checkbox"/>	<input type="checkbox"/>			<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
	<input checked="" type="checkbox"/>			<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	
Food Temperature Control				Utensils, Equipment and Vending			
<input checked="" type="checkbox"/>	<input type="checkbox"/>			<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
<input checked="" type="checkbox"/>	<input type="checkbox"/>			<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	
<input checked="" type="checkbox"/>	<input type="checkbox"/>			<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	
Food Identification				Physical Facilities			
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
<input checked="" type="checkbox"/>	<input type="checkbox"/>			<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
<input checked="" type="checkbox"/>	<input type="checkbox"/>			<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
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<input checked="" type="checkbox"/>	<input type="checkbox"/>			<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
<input checked="" type="checkbox"/>	<input type="checkbox"/>			<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	

Person in Charge / Title: <i>Annette Dunlap</i>		Annette Dunlap		Date: January 7, 2016	
Inspector: <i>John Wiseman</i>		Telephone No. (573)431-1947	EPHS No. 1507	Follow-up: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Follow-up Date: _____					



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FOOD PRODUCT/LOCATION	TEMP. in ° F	FOOD PRODUCT/ LOCATION	TEMP. in ° F
Prep cooler amb	36	Walk-in cooler	34
Prep cooler cold hold:		Walk-in freezer	0
Ground beef, sausage	36,37	Creamer from dispenser	34
pizza sauce, mushrooms	36,37		

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)	Initial
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4-601.11A	Food debris was observed on the conveyer and interior of the pizza oven. Food contact surfaces shall be clean to sight and touch. COS by washing, rinsing, and sanitizing.	COS	AD
4-601.11A	An accumulation of food residue was observed in the utensil drawer of the kitchen prep table. Food contact surfaces shall be clean to sight and touch. COS by washing, rinsing and sanitizing.	COS	
4-601.11A	Food residue was observed on the mixing paddle of the kitchen stand mixer. Food contact surfaces shall be clean to sight and touch. COIS by washing, rinsing, and sanitizing.	COS	
7-201.11B	Automotive chemicals were observed commingled with food items and single service items in the storage room. Toxic materials shall be stored so they cannot contaminate food or single service items. COS by relocating the automotive fluids.	COS	

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
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3-304.14B 1	A wet wiping cloth was observed stored on the prep cooler lid. Cloths used for wiping food spills shall be stored in sanitizer solution between uses. COS by removing the wiping cloth.	COS	AD
3-304.12B	Unhandled scoops were observed stored in containers of cheese and sausage at the prep cooler. Food contact portions of utensils shall be stored with the food contact portion above the food. COS by removing the scoops.	COS	
4-601.11C	An accumulation of food residue was observed in the bottom of the prep cooler. Non-food contact surfaces shall be kept free of an accumulation of dust, dirt, food residue and debris. COS by cleaning.	COS	
4-101.19	Bare wood shelving was observed installed below the pizza oven table. Non-food contact surfaces that are exposed to splash or frequent cleaning shall be smooth, non-absorbent and easily cleanable. Please seal or paint the shelf.	next routine	
3-302.12	A bulk container of flour was not labeled. Food that is stored out of its original container and that is not readily identifiable shall be labeled with the common name of the food. COS by labeling.	COS	
6-403.11A	Employee clothing was observed stored atop uncovered single use items in the kitchen. Employee items shall be located where they cannot contaminate food, food contact surfaces, single service items and clean linens. COS by moving the clothing.	COS	

EDUCATION PROVIDED OR COMMENTS

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Inspector: 	John Wiseman	Telephone No. (573) 431-1947
	EPHS No. 1507	Follow-up: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
		Follow-up Date:



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FOOD PRODUCT/LOCATION	TEMP. in ° F	FOOD PRODUCT/ LOCATION	TEMP. in ° F

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6-501.12A	Dried milk debris was observed on the floor below the milk shelving in the walk-in cooler. Physical facilities shall be cleaned as often as necessary to keep clean. COS by cleaning the floor.	COS	AD
6-501.14A	An accumulation of dust was observed on the fan covers of the cooling unit in the walk-in cooler. Intake and exhaust ducts shall be cleaned as often as necessary to prevent them from becoming a source of contamination. COS by cleaning the fan covers.	COS	
6-501.12A	Food debris was observed on the floor in the walk-in freezer. Physical facilities shall be cleaned as often as necessary to keep them clean. COS by cleaning the floor.	COS	
5-501.114	The facility dumpster does not have a plug installed in the drain. Outside storage receptacles shall be leak-proof. Please install a plug in the dumpster.	next routine	
6-501.12A	An accumulation of dust was observed on the mechanical vent in the facility restroom. Physical facilities shall be cleaned as often as necessary to keep clean. COS by cleaning the vent.	COS	

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