



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

TIME IN	7:50 am	TIME OUT	9:40 am
DATE	Sept. 17, 2015	PAGE	1 of 2

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: Crown Pointe Lodge Breakfast Bar	OWNER: Eagle Lake Restaurant	PERSON IN CHARGE: Pricella Mondello
ADDRESS: 4245 Hunt Road	ESTABLISHMENT NUMBER: 4616	COUNTY: 187
CITY/ZIP: Farmington 63640	PHONE: (573)701-9747	FAX: (573)701-9722
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 checked="" type="checkbox"/> BAKERY RESTAURANT <input 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"/> <input type="checkbox"/> <input type="checkbox"/>	Person in charge present, demonstrates knowledge, and performs duties			<input type="checkbox"/> <input type="checkbox"/> <input checked="" type="checkbox"/> <input type="checkbox"/>	Proper cooking, time and temperature		
Employee Health				<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input checked="" type="checkbox"/>	Proper reheating procedures for hot holding		
<input checked="" type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	Management awareness; policy present			<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input checked="" type="checkbox"/>	Proper cooling time and temperatures		
<input checked="" type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	Proper use of reporting, restriction and exclusion			<input checked="" type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input checked="" type="checkbox"/>	Proper hot holding temperatures		
Good Hygienic Practices				<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input checked="" type="checkbox"/>	Proper cold holding temperatures		
<input checked="" type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	Proper eating, tasting, drinking or tobacco use			<input checked="" type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input checked="" type="checkbox"/>	Proper date marking and disposition		
<input checked="" type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	No discharge from eyes, nose and mouth			<input checked="" type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input checked="" type="checkbox"/>	Time as a public health control (procedures / records)		
Preventing Contamination by Hands				<input type="checkbox"/> <input type="checkbox"/> <input checked="" type="checkbox"/>	Consumer Advisory		
<input checked="" type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	Hands clean and properly washed			<input type="checkbox"/> <input type="checkbox"/> <input checked="" type="checkbox"/>	Consumer advisory provided for raw or undercooked food		
<input checked="" type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	No bare hand contact with ready-to-eat foods or approved alternate method properly followed				Highly Susceptible Populations		
<input checked="" type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	Adequate handwashing facilities supplied & accessible			<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input checked="" type="checkbox"/>	Pasteurized foods used, prohibited foods not offered		
Approved Source				<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input checked="" type="checkbox"/>	Chemical		
<input checked="" type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	Food obtained from approved source			<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input checked="" type="checkbox"/>	Food additives: approved and properly used		
<input type="checkbox"/> <input type="checkbox"/> <input checked="" type="checkbox"/> <input type="checkbox"/>	Food received at proper temperature			<input checked="" type="checkbox"/> <input type="checkbox"/>	Toxic substances properly identified, stored and used		
<input checked="" type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	Food in good condition, safe and unadulterated				Conformance with Approved Procedures		
<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input checked="" type="checkbox"/>	Required records available: shellstock tags, parasite destruction			<input type="checkbox"/> <input type="checkbox"/> <input checked="" type="checkbox"/>	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 checked="" type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	Food separated and protected						
<input checked="" type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	Food contact surfaces cleaned & sanitized						
<input checked="" type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	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"/>	<input type="checkbox"/>	Pasteurized eggs used where required			<input checked="" type="checkbox"/>	<input type="checkbox"/>	In-use utensils: properly stored		
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Water and ice from approved source			<input checked="" type="checkbox"/>	<input type="checkbox"/>	Utensils, equipment and linens: properly stored, dried, handled		
Food Temperature Control					<input checked="" type="checkbox"/>	<input type="checkbox"/>	Single-use/single-service articles: properly stored, used		
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Adequate equipment for temperature control			<input checked="" type="checkbox"/>	<input type="checkbox"/>	Gloves used properly		
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Approved thawing methods used			Utensils, Equipment and Vending				
<input type="checkbox"/>	<input checked="" type="checkbox"/>	Thermometers provided and accurate			<input checked="" type="checkbox"/>	<input type="checkbox"/>	Food and nonfood-contact surfaces cleanable, properly designed, constructed, and used		
Food Identification					<input checked="" type="checkbox"/>	<input type="checkbox"/>	Warewashing facilities: installed, maintained, used; test strips used		
<input checked="" type="checkbox"/>	<input 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"/>	<input type="checkbox"/>	Insects, rodents, and animals not present			<input checked="" type="checkbox"/>	<input type="checkbox"/>	Hot and cold water available; adequate pressure		
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Contamination prevented during food preparation, storage and display			<input checked="" type="checkbox"/>	<input type="checkbox"/>	Plumbing installed; proper backflow devices		
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Personal cleanliness: clean outer clothing, hair restraint, fingernails and jewelry			<input checked="" type="checkbox"/>	<input type="checkbox"/>	Sewage and wastewater properly disposed		
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Wiping cloths: properly used and stored			<input checked="" type="checkbox"/>	<input type="checkbox"/>	Toilet facilities: properly constructed, supplied, cleaned		
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Fruits and vegetables washed before use			<input type="checkbox"/>	<input checked="" type="checkbox"/>	Garbage/refuse properly disposed; facilities maintained		
					<input type="checkbox"/>	<input checked="" type="checkbox"/>	Physical facilities installed, maintained, and clean		

Person in Charge / Title: <i>Pricella Mondello</i>	Pricella Mondello	Date:	September 17, 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: Sept. 21, 2015	



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

ESTABLISHMENT NAME Crown Pointe Lodge Breakfast Bar		ADDRESS 4245 Hunt Road		CITY /ZIP Farmington 63640	
FOOD PRODUCT/LOCATION		TEMP. in ° F	FOOD PRODUCT/ LOCATION		TEMP. in ° F
Hard boiled eggs, cold hold		42	Eggs, hot hold		190
Sausage, hot hold		177	Gravy, hot hold		192
Ambient, juice dispenser		50	Milk, pitcher, service counter		51
Ambient, True freezer		2	Ambient, True refrigerator		38
Apple, cranberry juice, dispenser		49, 51	Orange juice, dispenser		47

Code Reference	PRIORITY ITEMS	Correct by (date)	Initial
----------------	----------------	-------------------	---------

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.**

NOTE	Milk is held by time, with any remaining milk held on the service counter being discarded at the end of the service time, within a four hour time limit, as per Time as a Public Health policy, dated June 2012. A new Time as a Public Health Policy was signed during this visit.		
NOTE	Donuts are no longer being served at this establishment.		
3-501.16A	The Bunn juice dispenser had an ambient temperature of 50F, and the juices at 46 to 51F. Potentially hazardous foods shall be held at 41F or lower. NOTE: The distributor of this machine is Kohl's (217-222-5000). I contacted Mr. Jim Dieter at Kohl's who verified the juice is to be held at 41F or lower once it is opened (shelf stable before opening). There is not a way for hotel staff to change the thermostat, so he will prepare a service request for this unit and have a technician on site today. I said that, according to Ms. Boehm, Tradition Inn has also recently installed a similar dispenser. He stated he will have the service technician also check the machine at Tradition Inn. According to Ms. Boehm, the juices were placed in this machine yesterday. Please discard all opened juice and do not use the machine until it reliably holds the juice at 41F or lower. TEMPORARILY CORRECTED by discarding all juice in the unit.	9-21-15	PM

Code Reference	CORE ITEMS	Correct by (date)	Initial
----------------	------------	-------------------	---------

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.**

4-501.11A	A towel was in the bottom of the True refrigerator to absorb drippage that appeared to come from the top of the unit. The towel was very wet and is an ideal habitat for bacterial growth. Please remove towels when damp, or use only periodically to absorb pooled water, then place in laundry. Please ensure food is not stored under the drip or in the pooled water. Please repair the unit to prevent drippage, or replace unit.	9-27-15	PM
4-601.11C	An accumulation of debris was observed on the top wire shelf of the True refrigerator. Nonfood contact surfaces shall be cleaned at a frequency to prevent debris accumulation. Please clean.	9-21-15	PM
6-501.112	Dead insects observed behind and under equipment in the kitchen. Dead insects shall be removed from the facility at a frequency to prevent their accumulation. Please clean behind and under equipment.	9-21-15	
5-501.115	Trash was observed inside the enclosure for the outside trash dumpster. Trash enclosures shall be kept free of litter to reduce pest attraction. Please clean enclosure.	9-21-15	
4-204.112 A	A thermometer was not found inside the juice dispenser. Thermometers reading from 0 to 220F in two degree increments shall be placed inside cooling units in a convenient-to-read location. Please install a thermometer in the juice dispenser.	9-21-20	

EDUCATION PROVIDED OR COMMENTS

Person in Charge /Title <i>Pricella Mondello</i>	Pricella Mondello	Date: September 17, 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: Sept. 21, 2015