



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

TIME IN	11:21am	TIME OUT	3:07pm
DATE	7-8-16	PAGE	1 of 6

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: Dairy Queen	OWNER: H and J Frozen Assets	PERSON IN CHARGE: Stephanie Owings
ADDRESS: 1006 Highway K	ESTABLISHMENT NUMBER: 181	COUNTY: 187
CITY/ZIP: Bonne Terre, 63628	PHONE: 573-358-4200	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 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 checked="" type="checkbox"/> Disapproved <input type="checkbox"/> Not Applicable License No. 187-16797, exp. 6-3-17	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 checked="" type="checkbox"/> OUT <input type="checkbox"/> N/O <input type="checkbox"/> N/A	Proper cooking, time and temperature		
	Employee Health			<input type="checkbox"/> IN <input type="checkbox"/> OUT <input checked="" 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 type="checkbox"/> IN <input type="checkbox"/> OUT <input checked="" 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/O <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"/> 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 checked="" type="checkbox"/> OUT <input type="checkbox"/> N/O <input 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 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				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 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 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 type="checkbox"/> IN <input type="checkbox"/> OUT <input checked="" 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"/>	<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 type="checkbox"/>	<input checked="" 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 checked="" type="checkbox"/>	<input 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 type="checkbox"/>	<input checked="" type="checkbox"/>	Insects, rodents, and animals not present			<input checked="" type="checkbox"/>	<input 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"/>	<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 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 checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	Physical facilities installed, maintained, and clean		

Person in Charge / Title: <i>[Signature]</i>	Stephanie Owings	Date:	July 8, 2016
Inspector: <i>[Signature]</i>	John Wiseman	Telephone No.:	(573)431-1947
		EPHS No.:	1507
		Follow-up:	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
		Follow-up Date:	7-22-16



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

ESTABLISHMENT NAME Dairy Queen		ADDRESS 1006 Highway K		CITY /ZIP Bonne Terre, 63628	
FOOD PRODUCT/LOCATION		TEMP. in ° F	FOOD PRODUCT/ LOCATION		TEMP. in ° F
Cold hold: lettuce, tomato, cheese		40,42,26	Burger from grill		157
BevAir fryer freezer		34	Cold hold: diced tomato, salsa		41,42
Frican chicken/fries freezer		10	BevAir bake station freezer		0
Metalfrio cooler/freezer		34,5	Orange Julius cooler		34
Burger freezer		0	Condiment cooler		38

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.			
4-601.11A	Food debris was observed on the underside of the shelving above the burger station in the kitchen. Food contact surfaces shall be clean to sight and touch. Please clean and sanitize this area daily.	7-11-16	JK
4-601.11A	An accumulation of dried soda syrup and debris was observed on the nozzle housing of the soda machine at the drive-up window. Food contact surfaces shall be clean to sight and touch. Please wash, rinse, and sanitize this area daily.		
4-601.11A	Mildew and debris was observed on the interior surfaces of the Scotsman ice maker. Debris and hard water deposits area also accumulated on the exterior of the machine. Food contact surfaces shall be clean to sight and touch. Please empty the ice maker of ice and wash, rinse, and sanitize the ice maker interior including the inside of the lid.		
4-601.11A	Food residue was observed on plastic containers in clean storage in the ware washing area. Food contact surfaces shall be clean to sight and touch. Please wash, rinse and sanitize soiled equipment.		
4-601.11A	Debris was observed on the interior of an ice bucket stored hanging from the clean equipment rack in the ware washing area. Food contact surfaces shall be clean to sight and touch. Please wash, rinse, and sanitize the bucket.		
4-601.11A	Mildew was observed on the nozzles of the customer self-service soda fountain located in the dining room. Food contact surfaces shall be clean to sight and touch. Please wash, rinse and sanitize the nozzles and nozzle housing daily.		

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.			
4-601.11C	Food splatters were observed on the underside of the shelving above the hot-hold gravy and chili table. Non-food contact surfaces shall be kept free of an accumulation of dust, dirt, food residue and debris. Please clean all surfaces of the shelving.	7-22-16	OKV
6-501.12A	Food debris was observed of the walls and refrigerators adjacent to the gravy/chili hot-hold table. Physical facilities shall be cleaned as often as necessary to keep them clean. Please clean the walls and equipment in this area.		
4-601.11C	An accumulation of food debris was observed in the door glides of the burger and fryer freezer in the kitchen. Non-food contact surfaces shall be kept free of an accumulation of dust, dirt, food residue and debris. Please clean the doors, door glides and interior of these freezers.		
4-601.11C	An accumulation of grease and food residue was observed on the lower shelving of the burger station and on items stored in this area. Non-food contact surfaces shall be kept free of an accumulation of dust, dirt, food residue and debris. Please clean this area as often as necessary.		
6-501.12A	Food splatters were observed on the wall behind the Orange Julius station in the front service area. Physical facilities shall be cleaned as often as necessary to keep them clean. Please clean the wall behind all equipment in the front service area.		
6-202.15A	A visible gap was observed around the west delivery door. The outer openings of a food establishment shall be protected against the entry of insects and other pests. Please repair the gap at this door.		

EDUCATION PROVIDED OR COMMENTS

Person in Charge Title <i>Stephanie Owings</i>		Stephanie Owings		Date: July 8, 2016	
Inspector: <i>John Wiseman</i>	John Wiseman	Telephone No. (573)431-1947	EPHS No. 1507	Follow-up: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Follow-up Date: 7-22-16



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

ESTABLISHMENT NAME Dairy Queen		ADDRESS 1006 Highway K		CITY / ZIP Bonne Terre, 63628	
FOOD PRODUCT/LOCATION		TEMP. in ° F	FOOD PRODUCT/ LOCATION		TEMP. in ° F
Soft serve mix #1		36			
Soft serve mix #2		34			
Shake station freezer		5			
Walk-in cooler		36			
Walk-in freezer		0			

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.**

--	--	--	--

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.**

6-501.12A	Food splatters were observed on the wall behind the shake station and soft-serve machine near the drive-up area. Physical facilities shall be cleaned as often as necessary to keep them clean. Please clean the walls behind equipment in this area.	7-22-16	
4-601.11C	The work surfaces, equipment and supplies in the cake making area are covered with dust and food residue. Non-food contact surfaces shall be cleaned as often as necessary to keep them clean. Please clean surfaces and equipment in this area.		
6-501.114	The cake making area appears to be cluttered with equipment, supplies and a non-functioning refrigerator. The premises shall be free of items that are unnecessary to the operation or maintenance of the establishment such as equipment that is nonfunctional or no longer used. Please clean this area and remove equipment that is not functional.		
6-403.11A	Employee clothing, including foot ware, was observed comingled with a waffle iron and other equipment on the lower shelf of the steel table in the cake making area. Employee items shall be located to protect equipment, food, single service items and clean linens from contamination. Please separate employee items from equipment.		
6-501.12A	An accumulation of moisture, dirt, debris and mold was observed on the floor below the ice machine. Physical facilities shall be cleaned as often as necessary to keep them clean. Please clean the floor below the ice machine.		

EDUCATION PROVIDED OR COMMENTS

Person in Charge / Title:		Stephanie Owings	Date: July 8, 2016
Inspector:	John Wiseman	Telephone No. (573)-431-1947	EPHS No. 1507
		Follow-up: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Follow-up Date: 7-22-16



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

ESTABLISHMENT NAME Dairy Queen		ADDRESS 1006 Highway K		CITY /ZIP Bonne Terre, 63628	
FOOD PRODUCT/LOCATION		TEMP. in ° F	FOOD PRODUCT/ LOCATION		TEMP. in ° F

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
----------------	--	-------------------	---------

--	--	--	--

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
----------------	---	-------------------	---------

6-501.12A	An accumulation of dirt and debris was observed below the wire shelving in the kitchen and storage area. Physical facilities shall be cleaned as often as necessary to keep them clean. Please clean the floors below the wire shelving.	7-22-16	
5-501.116 B	An accumulation of food debris was observed on the exterior of the facility trash cans. Soiled waste receptacles shall be cleaned at a frequency that prevents them from developing an accumulation of soil or becoming an attractant for insects and rodents.		
4-901.11A	Steel pans were observed to be wet-nested in the clean storage rack in the ware washing area. After cleaning and sanitizing, equipment shall be air dried. Please rack equipment to facilitate drying prior to nesting.		
6-501.12A	A heavy accumulation of debris was observed on the plastic splash shield protecting equipment on the clean storage rack from splash from the mop sink. Physical facilities shall be cleaned as often as necessary to keep clean. Please clean the splash shield.		
6-501.12A	The mop sink and associated plumbing and surrounding walls and floor are dirty. Physical facilities shall be cleaned as often as necessary to keep them clean. Please clean the mop sink, the hoses and chemical dispensing equipment connected to the sink faucet and the floor and walls surrounding the sink.		

EDUCATION PROVIDED OR COMMENTS

Person in Charge / Title 		Stephanie Owings	Date: July 8, 2016
Inspector: 	John Wiseman	Telephone No. (573) 431-1947	EPHS No. 1507
		Follow-up: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
		Follow-up Date: 7-22-16	



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

ESTABLISHMENT NAME Dairy Queen		ADDRESS 1006 Highway K		CITY /ZIP Bonne Terre, 63628	
FOOD PRODUCT/LOCATION		TEMP. in ° F	FOOD PRODUCT/ LOCATION		TEMP. in ° F

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
----------------	--	-------------------	---------

--	--	--	--

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
----------------	---	-------------------	---------

6-501.14	An accumulation of dust and debris was observed on AC ceiling vents in the rear of the facility. Intake and exhaust air ducts shall be cleaned so they are not a source of contamination by dust, dirt, and other debris.	7-22-16	JJO
6-501.114	An accumulation of soiled tools and construction materials were observed stored on the floor near the rear entry. The premises shall be free of items that are unnecessary to the operation or maintenance of the establishment such as equipment that is nonfunctional or no longer used. Please remove the soiled tools and supplies.		
4-601.11C	An accumulation of food debris was observed on the gravity fed can rack tracks of the can storage rack in the storage area. Non-food contact surfaces shall be kept free of an accumulation of dust, dirt, food residue and debris. Please thoroughly clean the can rack.		
6-501.18	The hand wash sink and the paper towel dispenser near the ware washing area was observed to be dirty. Plumbing fixtures such as hand washing sinks shall be cleaned as often as necessary to keep them clean. Please clean the sink and towel dispenser.		
5-501.113	The facility dumpster lid was observed to be open. Outside waste handling receptacles shall be kept covered. Please keep the dumpster lid closed.		

EDUCATION PROVIDED OR COMMENTS

.

Person in Charge / Title: 		Stephanie Owings	Date: July 8, 2016
Inspector: 	John Wiseman	Telephone No. (573) 431-1947	EPHS No. 1507
Follow-up: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		Follow-up Date: 7-22-16	



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

ESTABLISHMENT NAME Dairy Queen	ADDRESS 1006 Highway K	CITY /ZIP Bonne Terre, 63628
-----------------------------------	---------------------------	---------------------------------

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

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.**

--	--	--	--

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.**

5-501.115	Woody vegetation was observed growing into the dumpster enclosure. A storage area and enclosure for refuse shall be maintained to prevent pest harborage conditions. Please remove the vegetation growing into the enclosure.	7-22-16	<i>[Signature]</i>
6-202.15A	A visible gap was observed at the bottom of the south entry door into the dining room. The outer openings of a food establishment shall be protected against the entry of insects and pests. Please repair the gap at the bottom of the door.		

EDUCATION PROVIDED OR COMMENTS

Person in Charge / Title <i>[Signature]</i>	Stephanie Owings	Date: July 8, 2016
Inspector: <i>[Signature]</i>	John Wiseman	Telephone No. (573) 431-1947 EPHS No. 1507
Follow-up: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		Follow-up Date: 7-22-16