



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

TIME IN	8:42am	TIME OUT	11:50am
DATE	8-18-15	PAGE	1 of 4

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: Donut Palace		OWNER: Gopal Pandey		PERSON IN CHARGE: Perita Sewak	
ADDRESS: 1414 St. Joe Dr.			ESTABLISHMENT NUMBER: 4773		COUNTY: 187
CITY/ZIP: Park Hills, 63601		PHONE: 573-327-4051		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 <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 checked="" 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					
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		
	<b>Employee Health</b>			<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		
	<b>Good Hygienic Practices</b>			<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 checked="" type="checkbox"/> OUT <input type="checkbox"/> N/O <input type="checkbox"/> N/A	Proper date marking and disposition		<input checked="" type="checkbox"/>
<input checked="" type="checkbox"/> OUT <input type="checkbox"/> N/O	No discharge from eyes, nose and mouth			<input type="checkbox"/> IN <input type="checkbox"/> OUT <input type="checkbox"/> N/O <input checked="" type="checkbox"/> N/A	Time as a public health control (procedures / records)		
	<b>Preventing Contamination by Hands</b>				<b>Consumer Advisory</b>		
<input type="checkbox"/> IN <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				<b>Highly Susceptible Populations</b>		
<input type="checkbox"/> IN <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		
	<b>Approved Source</b>				<b>Chemical</b>		
<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"/>
<input type="checkbox"/> IN <input checked="" type="checkbox"/> OUT	Food in good condition, safe and unadulterated				<b>Conformance with Approved Procedures</b>		
<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		
	<b>Protection from Contamination</b>			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 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"/> NO	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		
		<b>Food Temperature Control</b>			<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 type="checkbox"/>	<input checked="" type="checkbox"/>	Gloves used properly		
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Approved thawing methods used					<b>Utensils, Equipment and Vending</b>		
<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		
		<b>Food Identification</b>			<input type="checkbox"/>	<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		
		<b>Prevention of Food Contamination</b>					<b>Physical Facilities</b>		
<input type="checkbox"/>	<input checked="" type="checkbox"/>	Insects, rodents, and animals not present	<input checked="" type="checkbox"/>		<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 checked="" type="checkbox"/>	<input 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: Perita Sewak			Date: August 18, 2015		
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: 9-1-15					



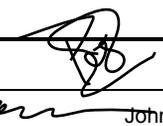
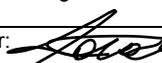
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ESTABLISHMENT NAME Donut Palace		ADDRESS 1414 St. Joe Dr.		CITY / ZIP Park Hills, 63601	
FOOD PRODUCT/LOCATION		TEMP. in ° F	FOOD PRODUCT/ LOCATION		TEMP. in ° F
2-Door kitchen cooler		36			
Whirlpool chest freezer		8			
Front area cooler #1, #2		40, 40			

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. <b>These items MUST RECEIVE IMMEDIATE ACTION within 72 hours or as stated.</b>	Correct by (date)	Initial
4-601.11A	Food residue was observed on the Belshaw donut dough dropping device in the kitchen. Food contact surfaces shall be clean to sight and touch. Please wash, rinse and sanitize daily.	8-21-15	P
3-501.17A	Dates of disposition were not observed on containers of cooked bacon, cooked sausage within the two-door cooler in the kitchen. Potentially hazardous foods stored refrigerated shall be marked with a day or date by which the food will be used, sold, or discarded. Please affix dates of disposition to these items.		
3-701.11A	Donut yeast dough was observed coming out of the plastic buckets stored in the kitchen cooler and coming in contact with cardboard boxes stored with it. Food that is unsafe or adulterated shall be discarded. Please discard the portion of the dough that has come out of the container.		
3-302.11A 1ab	Raw shell eggs were observed stored above containers of cheese and donut dough. Food shall be protected from cross contamination. Please store the eggs below and away from ready to eat foods.		

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). <b>These items are to be corrected by the next regular inspection or as stated.</b>	Correct by (date)	Initial
4-204.112 A	A thermometer was not observed inside the Whirlpool chest freezer located in the ware washing area. Refrigerated food storage units shall be provided with an accurate temperature measuring device. Please place a thermometer in this unit.	9-1-15	P
6-202.11A	The fluorescent light bulbs observed installed in the donut display case were not completely sealed by the shielding and end caps. Light bulbs installed where there is exposed food shall be fully shielded or shatter resistant. Please completely seal the light bulbs in this area.		
60202.15 A2	The drive-up window was observed to be left open during customer service at this area. A food establishment shall be protected against the entry of insects and pests by use of closed windows. Please close the window when it is not necessary for it to be open. COS by discussing with the manager.	COS	
4-601.11C	Food residue was observed on the front of food containers located under the prep table in the kitchen. Non-food contact surfaces shall be cleaned as often as necessary to keep clean. Please clean this area.	9-1-15	
4-601.11C	Food debris was observed on the shelving and floor in the two-door kitchen cooler. Non-food contact surfaces shall be cleaned as often as necessary to keep clean. Please clean this area.		
3-302.12	An unlabeled plastic spray bottle was observed stored on the prep table in the kitchen. Working containers of food shall be identified with the common name of the food. Please label the bottle.		

EDUCATION PROVIDED OR COMMENTS

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Follow-up: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		Follow-up Date: 9-1-15



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

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5-203.11A	An employee was observed not washing their hands before donning gloves for food service. Food employees shall wash their hands immediately before donning gloves for working with food. This same employee was observed reusing disposable gloves prior to food service. It has been noted on previous inspections that employees have failed to wash their hands appropriately. The location of the nearest hand wash sink is in an adjacent room. The lack of an easily accessible hand wash sink contributes to this continuing problem and the public health concerns associated with it. Hand wash sinks shall be located in areas of food preparation, food dispensing, ware washing and in toilet rooms. A hand wash sink shall be installed in the front service area in a location easily accessible by employees. The hand wash sink shall be equipped with hot and cold running water delivered through a mixing valve. The hot water service shall be at a temperature of at least 100 degrees F. The hand wash sink shall be provided with hand soap, hand drying provisions such as disposable hand towels and a waste container to receive used towels.	1-1-16	<i>P</i>
7-202.11A	A case of motor oil was observed stored on the floor in the facility restroom. Only those toxic materials necessary for the maintenance and operation of the food establishment shall be allowed in a food establishment. Please remove the motor oil from the premises. COS by removing from the premises.	COS	<i>P</i>

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6-501.18	An accumulation of grease and food debris was observed on the indirect drain below the three-compartment sink. Plumbing fixtures shall be cleaned as often as necessary to keep clean. Please clean the drain.	9-1-15	<i>P</i>
6-101.11A 13	The indirect drain below the three-compartment sink was observed to be held in place by strips of cloth tied to the above drain pipes. The strips of cloth were wet and heavily soiled. Physical facilities shall be easily cleanable. Please remove the cloth strips and provide a cleanable surface.	<i>P</i>	<i>P</i>
6-501.11	Stained ceiling tiles were observe in various places throughout the facility. Physical facilities shall be maintained in good repair. Please replace damaged ceiling tiles and continue to monitor for possible leaks and water infiltration.		
6-101.11A 3	Clean food equipment was observed drying on cloth towels atop the chest freezer in the ware washing room. Surface materials for drying clean equipment shall be non-absorbant and easily cleanable. Please dry clean equipment on a clean, sanitized, non-absorbant surface. It is highly recommended that wire drying shelving be installed in the ware washing room for this purpose.		
6-501.12A	An accumulation of dust, debris, spider webs and mold was observed on the door, walls and floor of the utility closet located adjacent to the ware washing area. Physical facilities shall be cleaned as often as necessary to keep clean. Please clean this area.		

EDUCATION PROVIDED OR COMMENTS

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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: 9-1-15



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ESTABLISHMENT NAME Donut Palace	ADDRESS 1414 St. Joe Dr.	CITY /ZIP Park Hills, 63601
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FOOD PRODUCT/LOCATION	TEMP. in ° F	FOOD PRODUCT/ LOCATION	TEMP. in ° F

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4-302.14	Quaternary ammonia test strips were not available for use in determining sanitizer strength. A test kits or other device that accurately measures the concentration in mg/L of sanitizing solution shall be provided. Please obtain an appropriate test kit.	9-1-15	P
4-302.12A	A food thermometer was not available for kitchen purposes. A food temperature measuring device shall be provided and readily accessible for use in determining adequate food temperatures. Please obtain a suitable thermometer for determining food temperatures. it shall have an operable range of 0 - 220 F. If it is a bi-metal dial type thermometer it shall also be graduated in two degree increments.	J	l

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