



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

TIME IN	11:57am	TIME OUT	2:21pm
DATE	10-7-16	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: Rohman's 50's Diner		OWNER: Rohman's 50's Diner, LLC		PERSON IN CHARGE: Shawn Roffol	
ADDRESS: 201 N. Desloge Rd.			ESTABLISHMENT NUMBER: 4733		COUNTY: 187
CITY/ZIP: Desloge, 63601		PHONE: 573-327-8454		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 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 checked="" type="checkbox"/> OUT N/O N/A	Proper cooking, time and temperature		
	Employee Health			IN OUT N/O N/A	Proper reheating procedures for hot holding		
<input checked="" type="checkbox"/> OUT	Management awareness; policy present			IN OUT N/O N/A	Proper cooling time and temperatures		
<input checked="" type="checkbox"/> OUT	Proper use of reporting, restriction and exclusion			IN OUT N/O N/A	Proper hot holding temperatures		
	Good Hygienic Practices			<input checked="" type="checkbox"/> OUT N/O N/A	Proper cold holding temperatures		
<input checked="" type="checkbox"/> OUT N/O	Proper eating, tasting, drinking or tobacco use			IN <input checked="" type="checkbox"/> N/O N/A	Proper date marking and disposition		<input checked="" type="checkbox"/>
<input checked="" type="checkbox"/> OUT N/O	No discharge from eyes, nose and mouth			IN OUT N/O N/A	Time as a public health control (procedures / records)		
	Preventing Contamination by Hands				Consumer Advisory		
<input checked="" type="checkbox"/> OUT N/O	Hands clean and properly washed			IN OUT N/A	Consumer advisory provided for raw or undercooked food		
<input checked="" type="checkbox"/> OUT N/O	No bare hand contact with ready-to-eat foods or approved alternate method properly followed				Highly Susceptible Populations		
IN <input checked="" type="checkbox"/>	Adequate handwashing facilities supplied & accessible			IN OUT N/O N/A	Pasteurized foods used, prohibited foods not offered		
	Approved Source				Chemical		
<input checked="" type="checkbox"/> OUT	Food obtained from approved source			IN OUT N/A	Food additives: approved and properly used		
IN OUT <input checked="" type="checkbox"/> N/A	Food received at proper temperature			IN <input checked="" type="checkbox"/>	Toxic substances properly identified, stored and used		
<input checked="" type="checkbox"/> OUT	Food in good condition, safe and unadulterated				Conformance with Approved Procedures		
IN OUT N/O <input checked="" type="checkbox"/>	Required records available: shellstock tags, parasite destruction			IN OUT N/A	Compliance with approved Specialized Process and HACCP plan		
	Protection from Contamination						
IN <input checked="" type="checkbox"/> N/A	Food separated and protected						
IN <input checked="" type="checkbox"/> N/A	Food-contact surfaces cleaned & sanitized						
IN OUT <input checked="" type="checkbox"/>	Proper disposition of returned, previously served, reconditioned, and unsafe food						

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

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				<input checked="" type="checkbox"/>	Utensils, Equipment and Vending		
<input checked="" type="checkbox"/>	<input 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"/>	<input type="checkbox"/>	Warewashing facilities: installed, maintained, used; test strips used		
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Food properly labeled; original container			<input checked="" type="checkbox"/>	<input type="checkbox"/>	Nonfood-contact surfaces clean		
	<input checked="" type="checkbox"/>	Insects, rodents, and animals not present			<input checked="" type="checkbox"/>	<input type="checkbox"/>	Physical Facilities		
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Contamination prevented during food preparation, storage and display			<input type="checkbox"/>	<input checked="" type="checkbox"/>	Hot and cold water available; adequate pressure		
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Personal cleanliness: clean outer clothing, hair restraint, fingernails and jewelry			<input type="checkbox"/>	<input checked="" type="checkbox"/>	Plumbing installed; proper backflow devices		
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Wiping cloths: properly used and stored			<input checked="" type="checkbox"/>	<input type="checkbox"/>	Sewage and wastewater properly disposed		
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Fruits and vegetables washed before use			<input checked="" type="checkbox"/>	<input type="checkbox"/>	Toilet facilities: properly constructed, supplied, cleaned		
					<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: Shawn Roffol		Date: October 7, 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: 10-21-16	



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**FOOD ESTABLISHMENT INSPECTION REPORT**

ESTABLISHMENT NAME Rohman's 50's Diner		ADDRESS 201 N. Desloge Rd.		CITY /ZIP Desloge, 63601	
FOOD PRODUCT/LOCATION		TEMP. in ° F	FOOD PRODUCT/ LOCATION		TEMP. in ° F
Cold table cooler amb		34	Frigidaire refrigerator/freezer		42, 0
CldHld:tomato, lettuce, cheese		40,41,41	Burger as prepared		170
GE Freezer amb		10	Chest freezer in ware washing room		10
Kenmore refrigerator/freezer		38, 0	mini fridge in bar area		38
Amana refrigerator/freezer		40, 0			

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
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3-501.17A	Green beans, baked beans and potato salad was observed stored in the Amana refrigerator with out discard dates. Potentially hazardous foods stored refrigerated shall be marked with the day or date, not to exceed seven day, by which time the food with be sold, consumed or discarded. COS by marking with the discard date.	COS	
6-501.111	Live spiders and webs were observed in the cabinet below the hand wash sink in the hallway restroom. The presence of insects and rodents shall be controlled to minimize their presence on the premises. Please remove pests and use control measures such as: routine inspection of the premises for pests; removing sources of pest attraction such as food debris, moisture and clutter; closing pest entry points such as holes in walls and the exterior of the building; using pest control methods such as traps or professional services.	10-10-16	
3-302.11A	Rolls of raw ground beef were observed stored above bags of ice and ready to eat foods in the chest freezer in the ware washing room. Food shall be protected from cross contamination by storing raw animal foods below and away from ready to eat foods. Please separate the raw burger from the other foods.		
5-203.14	A wye connector was observed installed on the facility mop sink faucet. A plumbing system shall be installed to preclude the backflow of materials into the municipal water system. Please install an American Society of Sanitary Engineers (A.S.S.E.) approved hose bibb vacuum breaker on each arm of the wye connector.		

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
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5-202.12	The hot water supply to the kitchen hand wash sink was observed to be turn off. The manager said that it was turned off due to a water leak at the faucet. And hand wash sink shall be provided with hot and cold water through a mixing valve. A plumbing system shall be maintained in good repair. Please repair the leak and provide hot water to the hand sink at all times.	10-21-16	
5-205.15B			
4-101.19	Aluminum foil was observed in use as a surface covering on various surfaces in the kitchen. Non-food contact surfaces that are exposed to splash, spillage, or other food soiling or that require frequent cleaning shall be constructed of a corrosion resistant, non-absorbent, and smooth material. Please remove the foil and clean surfaces as needed.		
4-903.12A	A toaster was observed stored below the hand wash sink plumbing in the kitchen. Food equipment may not be stored below sewer lines. COS by removing the toaster.	COS	
6-501.12A	Dead insects and dirt were observed around the base of the hallway toilet. The physical facility shall be cleaned as often as necessary to keep clean. Please thoroughly clean the restroom.	10-21-16	
6-501.16	A wet mop was observed stored in a tote with a hose and dirty water. Please hang the mop so that it can dry without contaminating equipment or creating a health hazard.		
5-205.15B	A plumbing leak was observed in the P trap below the mop sink. A plumbing system shall be maintained in good repair. Please repair the leak.		

EDUCATION PROVIDED OR COMMENTS

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7-102.11	An unlabeled spray bottle of cleaner was observed in storage in the ware washing room. Working containers of cleaning agents or toxics shall be labeled with the common name of the material. Please label all containers.	10-7-16	
4-601.11A	An accumulation of mold was observed inside the nozzles of the soda fountain located in the bar area. Food contact surfaces shall be clean to sight and touch. Please wash, rinse and sanitize the soda nozzles daily.		

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6-501.12A	A five gallon bucket containing grease was observe stored in the ware washing room. Physical facilities shall be cleaned as often as necessary to keep them clean. Please clean the bucket or remove it from the premises to reduce pest attractron.	10-21-16	
6-501.12A	An accumulation of dirt and debris was observed on the floor of the ware washing room. especially behind the equipment. Physical facilities shall be cleaned as often as necessary to keep them clean. Please thoroughly clean the ware washing room and floor.		
6-202.15	The front door was not provided with an automatic closing device. Please repair the front door to self-close.		

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