



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

TIME IN	11:18am	TIME OUT	2:25 pm
DATE	July 5, 2016	PAGE	1 of 5

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: S-F Scout Ranch Camp Famous Eagle Dining Hall		OWNER: Boy Scouts of America Greater St. Louis Area Council		PERSON IN CHARGE: Cheryl Budnik	
ADDRESS: 150 U.S. Hwy 67			ESTABLISHMENT NUMBER: 4785		COUNTY: St. Francois (187)
CITY/ZIP: Knob Lick, MO 63651		PHONE: 573-756-5738		FAX: 573-756-1243	
PURPOSE <input type="checkbox"/> Pre-opening <input type="checkbox"/> Routine <input checked="" 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 type="checkbox"/> COMMUNITY <input checked="" 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 type="checkbox"/> IN <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 type="checkbox"/> IN <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"/> NO <input type="checkbox"/> N/A	Proper cold holding temperatures		
<input type="checkbox"/> IN <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 type="checkbox"/> OUT <input type="checkbox"/> N/O <input checked="" 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 type="checkbox"/> IN <input type="checkbox"/> OUT <input checked="" type="checkbox"/> N/O	No bare hand contact with ready-to-eat foods or approved alternate method properly followed				Highly Susceptible Populations		
<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		
	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"/> IN <input 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 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 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 type="checkbox"/>	<input checked="" 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 checked="" 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: <i>Cheryl Budnik</i>		Cheryl Budnik		Date: July 5, 2016	
Inspector: <i>Jon Peacock</i>		Jon Peacock		Telephone No. (573)431-1947	EPHS No. 880
				Follow-up: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
				Follow-up Date: July 27, 2016	



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ESTABLISHMENT NAME S-F Scout Ranch Camp Famous Eagle Dining Hall	ADDRESS 150 U.S. Hwy 67	CITY /ZIP Knob Lick, MO 63651
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FOOD PRODUCT/LOCATION	TEMP. in ° F	FOOD PRODUCT/ LOCATION	TEMP. in ° F
Pasta salad/Walk-in cooler	37	Strawberry yogurt/True 2 dr refrigerator/Kitchen	40
Shredded cheese/True 2 dr fridge	40	True 2 door refrigerator/Kitchen/Ambient	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. These items MUST RECEIVE IMMEDIATE ACTION within 72 hours or as stated.	Correct by (date)	Initial
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2-401.11B	A closed beverage container was observed stored on a shelf above the toaster oven in the kitchen. A food employee may drink from closed beverage containers if the container is handled to prevent contamination of the food employee's hands, the container and stored in a manner to prevent the contamination of exposed food, clean equipment and utensils, linens and unwrapped single-service and single-use articles. (Corrected by relocating beverage container to a more appropriate location.)	COS	CB
5-205.15A	RPZ backflow prevention device observed leaking from the atmospheric vent on the water line to the Groen food steamers in the kitchen. A backflow prevention device must be operable and maintained in good repair.	7-27-16	
4-601.11A	Dried food debris was observed on the top underside of the Hobart mixer in the kitchen and within the mixing bowl. Food-contact surfaces of equipment must be clean to the sight and touch and must be washed, rinsed, sanitized and air dried by a clean-in-place (CIP) method or by immersing in the 3-vat sink or dish machine. (Corrected by cleaning and sanitizing the mixer and the mixing bowl.)	COS	
6-501.111 B/C	Dust, debris and rodent droppings were observed on the floor in beneath the front serving line equipment. The premises must be routinely inspected for the evidence of pests and approved methods employed when the presence of pests within the premises is found. Please clean and remove all evidence of pest activity and thoroughly clean.	7-27-16	

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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6-501.11	Drawer broken and drawer front missing in kitchen. Physical facilities must be maintained in good repair. (Clean utensils observed stored in drawer beneath the missing drawer front).	7-27-16	CB
6-202.14	Restroom door in PX was not self-closing. Restroom doors that open into a food establishment must be fully self-closing. Please install self-closing device.	7-27-16	
6-301.14	No handwashing signage was observed at any of the restroom handwashing sinks off the dining room. Handwashing signage must be installed at all handwashing sinks used by food employees. (Corrected by placing handwashing stickers in each rest room by Mr. D'Angelo Ramos, B.S.A.)	COS	
6-501.11	Window iced over on door into the walk-in cooler. Physical facilities must be maintained in good repair. Please repair/replace.	7-27-16	

EDUCATION PROVIDED OR COMMENTS

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

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Note: 3-501.16A	The temperature of the shredded cheese was unable to be ascertained on the salad bar. Cubed ice is used on the salad bar to maintain potentially hazardous foods (PHF's). Shredded cheese was observed at 40F in the True 2 door refrigerator in the kitchen prior to setting up the salad bar. PHF's must be held at or below 41F or the use of time as a public health control, according to 3-501.19 of the Missouri Food Code, must be employed. Please ensure that PHF's are maintained at or below 41F OR use time as a public health control for maintaining PHF's per 3-501.19 of the Missouri Food Code. (If time as a control is used, written procedure must be developed for tracking PHF's and all PHF's must be discarded after service.)	7-27-16	cb
2-201.11E	A copy of the employee illness policy was not available during this visit. Please provide a copy of the policy that requires food employees and conditional employees to report to the person-in-charge information about their health and activities as they relate to diseases that are transmissible through food. Also, the policy must describe when and under what conditions a food employee may be restricted, excluded and the procedures for reinstating a food employee. A copy of the US FDA Employee Health and Personal Hygiene Handbook should be consulted for review and development of an employee illness policy. This booklet may be reviewed on-line. The US FDA Employee Health and Personal Hygiene Handbook may be utilized as the employee illness policy. If so, please download a copy and provide a written statement acknowledging the use of this handbook.	7-27-16	

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Note: 3-306.11 5-203.11A 6-501.111 B/C	Pre-packaged, single-use containers of peanut butter and jelly and slices of bread contained in individual packaging was observed on the self-service salad bar.	Prior to next season	CB
	The preparation of snow cones was observed occurring in the PX. A convenient handwashing sink was not available for use by food employees. (A handwashing sink was located in a restroom approximately 10-15 feet away). A convenient handwashing sink must be installed in the area in which the snow cones are prepared AND outside of the restroom OR the sale of snow cones be discontinued until a handwashing sink can be installed. The handwashing sink must be properly equipped with hot and cold running water via a mixing faucet, hand cleanser, handwashing signage, paper towels from a dispenser and a waste receptacle. In the interim, the handwashing sink in the restroom may be used for the remainder of the operating season. However, prior to next season, a handwashing sink must be installed within the PX or the preparation of snow cones and/or other foods may not occur. (Handwashing not observed in PX during visit).		
	Rodent droppings were observed on the flooring in the public restroom area of the building. Rodent droppings were observed on the floor of the restroom in the PX. Rodent droppings were observed on the floor in the "caged storage area"/rear kitchen storage area. The presence of insects, rodents, or other pests must be controlled to minimize their presence on the premises. Please clean and remove all evidence of rodent activity throughout the building and intensify pest control measures working with your pest control operator AND ensure that all outer openings are sealed.	7-27-16	

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Note: 3-501.16A	The temperatures of refrigerated PHF's, being prepared for transportation to Camp Gamble, could not be ascertained prior to departure from this facility. Previously, some PHF's were observed above 41F when leaving this facility. Currently, this facility uses milk crates and an enclosed Penske rental truck without any means of refrigeration. The temperatures of PHF's must be maintained at or below 41F during transportation and storage. It is recommended that additional Cambros, insulated coolers, a refrigerated vehicle, etc. be employed to adequately protect PHF's. Further, PHF's held hot must be maintained at or above 135F during storage and transportation. It is recommended that heated food cabinets, Cambros, insulated coolers, etc. be employed.	ASAP, prior to next season	<i>CB</i>
4-601.11A	Dried food debris was observed on the cutting blade and guard of the meat slicer in the food preparation cooler. Food-contact surfaces of equipment must be clean to the sight and touch. Please wash, rinse, sanitize & air dry every 4 hours or less. (Corrected by cleaning during visit)	COS	
Note:	Upon arrival a male employee was observed dumping out soapy water out of a plastic garbage container onto the rear concrete parking lot. Wash water is considered sewage and must be disposed of through the sanitary sewage system. Please dispose all wastewater through the mop sink.	7-5-16	

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