



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

TIME IN	11:47 am	TIME OUT	12:37 pm
DATE	July 27, 2016	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: S-F Scout Ranch: Camp Gamble Commissary/PX		OWNER: Greater St. Louis Area Council: Boy Scouts of America	PERSON IN CHARGE: D'Angelo Joel Ramos
ADDRESS: 150 US Hwy 67		ESTABLISHMENT NUMBER: 4793	COUNTY: St. Francois (187)
CITY/ZIP: Knob Lick, MO 63651		PHONE: (573) 756-5738	FAX: NA
PURPOSE <input type="checkbox"/> Pre-opening <input type="checkbox"/> Routine <input checked="" type="checkbox"/> Follow-up <input type="checkbox"/> Complaint <input type="checkbox"/> Other _____		P.H. PRIORITY : <input checked="" type="checkbox"/> H <input type="checkbox"/> M <input type="checkbox"/> L	
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 type="checkbox"/> PUBLIC <input checked="" type="checkbox"/> PRIVATE	
		WATER SUPPLY <input type="checkbox"/> COMMUNITY <input checked="" type="checkbox"/> NON-COMMUNITY <input type="checkbox"/> PRIVATE Date Sampled <u>6/27/16</u> Results <u>Pending</u>	

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"/> IN <input type="checkbox"/> OUT <input type="checkbox"/> N/O <input checked="" type="checkbox"/> N/A	Proper cooking, time and temperature		
	Employee Health			<input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT <input type="checkbox"/> N/O <input checked="" type="checkbox"/> N/A	Proper reheating procedures for hot holding		
<input checked="" type="checkbox"/> OUT	Management awareness; policy present			<input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT <input type="checkbox"/> N/O <input checked="" 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"/> IN <input type="checkbox"/> OUT <input type="checkbox"/> N/O <input checked="" type="checkbox"/> N/A	Proper hot holding temperatures		
	Good Hygienic Practices			<input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT <input type="checkbox"/> N/O <input checked="" type="checkbox"/> N/A	Proper cold holding temperatures		
<input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT <input checked="" 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 checked="" type="checkbox"/> N/A	Proper date marking and disposition		
<input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT <input checked="" type="checkbox"/> N/O	No discharge from eyes, nose and mouth			<input checked="" 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			<input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT <input checked="" type="checkbox"/> N/A	Consumer Advisory		
<input checked="" type="checkbox"/> OUT <input type="checkbox"/> N/O	Hands clean and properly washed			<input checked="" 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"/> IN <input checked="" type="checkbox"/> OUT	Adequate handwashing facilities supplied & accessible			<input checked="" 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			<input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT <input checked="" type="checkbox"/> N/A	Chemical		
<input checked="" type="checkbox"/> OUT	Food obtained from approved source			<input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT <input checked="" type="checkbox"/> N/A	Food additives: approved and properly used		
<input checked="" type="checkbox"/> IN <input checked="" type="checkbox"/> OUT <input type="checkbox"/> N/C <input 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 checked="" 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 checked="" 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 checked="" type="checkbox"/> IN <input checked="" type="checkbox"/> OUT <input type="checkbox"/> N/A	Food-contact surfaces cleaned & sanitized						
<input checked="" 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 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 type="checkbox"/>	<input checked="" 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"/>	Prevention of Food Contamination			<input checked="" type="checkbox"/>	<input type="checkbox"/>	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 checked="" type="checkbox"/>	<input 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 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 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> D'Angelo Joel Ramos	Date: July 27, 2016
Inspector: <i>[Signature]</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: Prior to next year



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

ESTABLISHMENT NAME S-F Scout Ranch: Camp Gamble Commissary/PX		ADDRESS 150 US Hwy 67	CITY /ZIP Knob Lick, MO 63651	
FOOD PRODUCT/LOCATION		TEMP. in ° F	FOOD PRODUCT/ LOCATION	
Walk-in cooler (Ambient)		40	Italian pasta salad in random milk crate	
Hot dogs in random milk crate delivered from Camp Famous Eagle Dining Hall		49	delivered from Camp Famous Eagle Dining Hall	

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
6-501.111 B	Mouse droppings were observed on the floor, on shelving in the commissary. The presence of pests must be controlled to minimize their presence on the premises. Please clean and remove any harborage areas, remove any evidence of pest activity and intensify pest control measures by retention of a reputable pest control operator. It is recommended the miscellaneous camping supplies be removed and relocated as these items present harborage for pests.	As soon as possible.	<i>JS</i>
3-501.16A	Italian pasta salad noted at 44F in a randomly selected milk crate upon delivery from Camp Famous Eagle Dining Hall. Refrigerated potentially hazardous foods (PHF's) must be maintained at or below 41F.	Prior to next operating season	
3-501.16A	Hot dogs were observed at 49F in a randomly selected milk crate upon delivery from Camp Famous Eagle Dining Hall. Refrigerated potentially hazardous foods must be maintained at or below 41F.	Prior to next operating season	
5-203.14B	The urinals in the restroom located in the "staff row area" were observed without any observed backflow prevention device(s) on the incoming water line to each urinal. A plumbing system must be installed to prevent backflow of a solid, liquid or gas contaminant into the water supply at each point of use. Please install an A.S.S.E. rated backflow prevention device that is rated for this application and for continuous pressure.	Prior to next operating season	

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
5-501.114	Two outdoor refuse dumpsters observed with drain openings but no drain plugs installed. The other outdoor refuse dumpster was observed with refuse within the bottom of the dumpster. Drains in receptacles and waste handling units for refuse must have drain plugs in place.	By next operating season	<i>JS</i>
6-202.15A	Rear overhead door into the commissary was observed open during the inspection. Outer openings of a food establishment must be protected against the entry of pests by sealing entry points for pests and by equipping the facility with tight-fitting self-closing doors. Please keep closed when not in use.		
6-202.15A	The exterior entry door was observed lacking a self-closing device. Please install to ensure door is tight-fitting and self-closing to prevent the entry of pests. Please seal the bottom of the door.		
6-501.12A	Dust and debris observed on the floor below the shelving in the commissary. Physical facilities must be cleaned as often as necessary to maintain cleanliness.		
6-202.15A	Daylight was observed around and below the overhead "food pickup" doors in the commissary. Outer openings must be maintained to prevent the entry of pests. Please seal.		

EDUCATION PROVIDED OR COMMENTS

Note: This reinspection was rescheduled from July 20, 2016 due to a conflict in scheduling. Menu: Hot dogs, buns, oatmeal raisin cookies, apples, italian pasta salad, kool aid.

Person in Charge /Title: <i>D'Angelo</i>	D'Angelo Joel Ramos	Date: July 27, 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: Prior to next year



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

ESTABLISHMENT NAME S-F Scout Ranch: Camp Gamble Commissary/PX		ADDRESS 150 US Hwy 67	CITY /ZIP Knob Lick, MO 63651	
FOOD PRODUCT/LOCATION		TEMP. in ° F	FOOD PRODUCT/ LOCATION	

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

3-501.16A	Foods were observed transported within an enclosed Penske rental van from Camp Famous Eagle Dining Hall to the Camp Gamble Commissary. The foods were individually packaged and placed within plastic milk crates. No measure of refrigeration of these foods was observed. The temperatures of the foods were taken prior to departure from Camp Famous Eagle Dining Hall and again following arrival to the commissary at Camp Gamble. Hot dogs were observed at 49F and italian pasta salad was observed at 44F. All PHF's must be at or below 41F prior to departure from the Camp Famous Eagle Dining Hall and received at that temperature at Camp Gamble/other camps. A procedure must be developed along with a tracking log for receipt of foods. Adequate means for ensuring proper temperatures of PHF's during transport must be developed. This may include but is not limited to the use of refrigerated easily-cleanable coolers/Cambros or the use of a properly equipped and sized refrigerated transport vehicle. strongly recommended that an enclosed vehicle having adequate means of refrigeration/freezing equipment be obtained and placed into use by next operating season. Additionally, if hot PHF's are transported and received, effective measures must be utilized for the assurance that PHF's are held at or above 135F. This may include the use of heated food cabinets, insulated coolers and Cambros that are easily-cleanable, etc	As soon as possible. Prior to next operating season	
-----------	---	---	--

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

4-301.12 A-B	No warewashing facilities observed on the premises. An ice machine was observed in the commissary and loose ice was noted being dispensed by staff. Further, a snow cone machine was observed in the PX. Currently, the ice scoop and the snow cone machine are not being cleaned by use of a 4 step process, (i.e. wash, rinse, sanitize and air dry). Please develop a clean-in-place (CIP) process for the daily cleaning and sanitizing of the snow cone machine and for the routine cleaning/sanitizing of the ice machine. Further, all utensils used must be washed, rinsed, sanitized and air dried at least daily in a 3-vat sink/commercial dish machine. This may be accomplished by the installation of a 3-vat sink or by transporting all soiled equipment and utensils on a daily basis to the Camp Famous Eagle Dining Hall. Additional clean equipment and utensils should be stored in a sealed container on the premises. IF soiled equipment and utensils will be transported to Camp Famous Eagle Dining Hall, please develop a log and a written statement for tracking the transportation of the utensils by date/time. Please be advised IF the improper cleaning and sanitizing of equipment/utensils is further noted; then, a 3-vat sink will be required in the Camp Gamble Commissary/Px. The 3-vat sink drain, if installed, must have an indirect plumbing connection between the sink and the sewage drain.	By next operating season	
6-202.15A	Daylight observed at base of wall below overhead "food pickup doors" Exterior openings must be sealed to prevent the entry of rodents, insects or other pests.		
6-202.15A	Opening observed in exterior wall near walk-in cooler. Please seal to exclude pest entry.		

EDUCATION PROVIDED OR COMMENTS

Note: A return visit was made to the Camp Famous Eagle Dining Hall from 12:35 pm - 3:11 pm to complete the paperwork and conduct the exit interview. This facility is scheduled to close on July 31, 2016 for the season.

Person in Charge / Title:	D'Angelo Joel Ramos	Date: July 27, 2016
Inspector:	Jon Peacock	Telephone No. (573)-431-1947
	EPHS No. 880	Follow-up: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
		Follow-up Date: Prior to next year



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

ESTABLISHMENT NAME S-F Scout Ranch: Camp Gamble Commissary/PX		ADDRESS 150 US Hwy 67	CITY /ZIP Knob Lick, MO 63651	
FOOD PRODUCT/LOCATION		TEMP. in ° F	FOOD PRODUCT/ LOCATION	

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
6-301.12A	No paper towels were observed at the handwashing sink in the PX. Handwashing sinks must be provided with a sanitary means for drying hands, (i.e. paper towels from dispensers or hand drying devices). Please install.	Prior to next operating season	
6-301.14	No handwashing signage at the handwashing sink in the PX. Please install at handwashing sink. (Handwashing sticker provided to Mr. Ramos). (Corrected on site)		
4-302.12A	No metal stemmed food thermometers were observed on the premises. Metal stemmed food thermometers must be purchased for use in monitoring PHF's under transport and within the commissary/PX. At a minimum, at least 3 thermometers must be obtained. These thermometers should be in the 0-220F temperature range and graduated every 2F.		
6-202.15A	Daylight observed below the rear overhead delivery door. Outer openings must be sealed to exclude the entry of pests. Please seal.		
Note:	Prior to next operating season, it is strongly recommended that food safety education be provided to the kitchen and commissary/PX staff. Also, it is recommended that prior to 2017 summer camp that a walk-thru of the Camp Famous Eagle Dining Hall/PX and Camp Gamble Commissary/PX be completed to verify all areas are satisfactory prior to operation. The walk-in cooler food preparation room ambient temperature should be addressed to lower the temperature within this room to 41F or lower.		

EDUCATION PROVIDED OR COMMENTS

Person in Charge /Title:		D'Angelo Joel Ramos	Date: July 27, 2016
Inspector:	Jon Peacock	Telephone No. (573)431-1947	EPHS No. 880
Follow-up: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		Follow-up Date: Prior to next year	